

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

ADDRESS (number and street) ▼

PO BOX 295

☐ Check if different than previously reported. (ACC)

CHRISTIANSTED

VI

00821

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00553560

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-election Year Only) (MY)
- ☐ Termination Report (TER)

- (b) Monthly Report Due On: ☐ Feb 20 (M2) ☐ May 20 (M5) ☐ Aug 20 (M8) ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Mar 20 (M3) ☐ Jun 20 (M6) ☒ Sep 20 (M9) ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Apr 20 (M4) ☐ Jul 20 (M7) ☐ Oct 20 (M10) ☐ Jan 31 (YE)

- (c) 12-Day ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
- PRE-Election** Report for the: ☐ Convention (12C) ☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

- (d) 30-Day ☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)
- POST-Election** Report for the:

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period 08 / 01 / 2016 through 08 / 31 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer SCOTT B MACKENZIE

Signature of Treasurer

SCOTT B MACKENZIE

[Electronically Filed]

Date

09 / 20 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
08		01		2016

To:

M M	/	D D	/	Y Y Y Y Y Y
08		31		2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date																		
6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="6">2016</td></tr></table>	Y	Y	Y	Y	Y	Y	2016							<table><tr><td colspan="6">42513.77</td></tr></table>	42513.77					
Y	Y	Y	Y	Y	Y															
2016																				
42513.77																				
(b) Cash on Hand at Beginning of Reporting Period.....	<table><tr><td colspan="6">42048.54</td></tr></table>	42048.54																		
42048.54																				
(c) Total Receipts (from Line 19)	<table><tr><td colspan="6">279251.91</td></tr></table>	279251.91						<table><tr><td colspan="6">1299915.52</td></tr></table>	1299915.52											
279251.91																				
1299915.52																				
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<table><tr><td colspan="6">321300.45</td></tr></table>	321300.45						<table><tr><td colspan="6">1342429.29</td></tr></table>	1342429.29											
321300.45																				
1342429.29																				
7. Total Disbursements (from Line 31).....	<table><tr><td colspan="6">183920.12</td></tr></table>	183920.12						<table><tr><td colspan="6">1205048.96</td></tr></table>	1205048.96											
183920.12																				
1205048.96																				
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<table><tr><td colspan="6">137380.33</td></tr></table>	137380.33						<table><tr><td colspan="6">137380.33</td></tr></table>	137380.33											
137380.33																				
137380.33																				
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">0.00</td></tr></table>	0.00																		
0.00																				
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<table><tr><td colspan="6">344847.75</td></tr></table>	344847.75																		
344847.75																				



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	96998.52	372694.79
(ii) Unitemized	182016.39	887844.29
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	279014.91	1260539.08
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ►	279014.91	1260539.08
12. Transfers From Affiliated/Other Party Committees.....	0.00	35142.44
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	237.00	4234.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ►	279251.91	1299915.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ►	279251.91	1299915.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	53127.42	715441.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	53127.42	715441.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	6934.88
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2000.00
24. Independent Expenditures (use Schedule E)	130792.70	477822.24
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	2849.95
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	183920.12	1205048.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	183920.12	1205048.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	279014.91	1260539.08
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	279014.91	1260539.08
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	53127.42	715441.89
37. Offsets to Operating Expenditures (from Line 15, page 3).....	237.00	4234.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	52890.42	711207.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM ADAMSON 190 JR

Mailing Address 1400 WAVERLY RD
 APT A222

City State Zip Code
 GLADWYNE PA 19035

FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 01 2016

Transaction ID : SA11AI.46782

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WILLIAM ADAMSON 190 JR

Mailing Address 1400 WAVERLY RD
 APT A222

City State Zip Code
 GLADWYNE PA 19035

FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 01 2016

Transaction ID : SA11AI.46783

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WILLIAM ADAMSON 190 JR

Mailing Address 1400 WAVERLY RD
 APT A222

City State Zip Code
 GLADWYNE PA 19035

FEC ID number of contributing
 federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 24 2016

Transaction ID : SA11AI.46784

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS PATRICIA A AINLEY 923

Mailing Address PO BOX 3908

City
CRESTLINE

State Zip Code
CA 92325

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PROP MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.46801

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ARLINE L AKINA 967

Mailing Address 99-025 LOHEA PL

City
AIEA

State Zip Code
HI 96701

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.46806

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ARLINE L AKINA 967

Mailing Address 99-025 LOHEA PL

City
AIEA

State Zip Code
HI 96701

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1275.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.46807

Amount of Each Receipt this Period

225.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

575.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR JAMES A ALBRIGHT 061 MD

Mailing Address 51 BROOKSIDE BLVD

City State Zip Code
 WEST HARTFORD CT 06107

FEC ID number of contributing federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.46815

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN T ALDERSON 926

Mailing Address 2239 HEATHER LN

City State Zip Code
 NEWPORT BEACH CA 92660

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.46821

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN T ALDERSON 926

Mailing Address 2239 HEATHER LN

City State Zip Code
 NEWPORT BEACH CA 92660

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11AI.46822

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. NANCY ALLEN 460

Mailing Address 1411 MORNINGSIDE DR

City

LEBANON

State

IN

Zip Code

46052

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.46838

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JAMES ALLEY 640

Mailing Address 12713 SE RANSON RD

City

LEES SUMMIT

State

MO

Zip Code

64082

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : SA11AI.46860

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES ALLEY 640

Mailing Address 12713 SE RANSON RD

City

LEES SUMMIT

State

MO

Zip Code

64082

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.46861

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

113.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES ALLEY 640

Mailing Address 12713 SE RANSON RD

City

LEES SUMMIT

State

MO

Zip Code

64082

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.46862

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EMELIA AMADEO 113

Mailing Address 10460 QUEENS BLVD APT 22L

City

FLUSHING

State

NY

Zip Code

11375

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.46891

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN AMOROSO 015

Mailing Address 18 BLOSSOM TREE DR

City

SHREWSBURY

State

MA

Zip Code

01545

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.46892

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES A ANDERSON 586

Mailing Address 1266 SIGNAL BUTTE UNIT 67

City

DICKINSON

State

ND

Zip Code

58601

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.46917

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS PATRICIA D ANGELUCCI 194

Mailing Address 200 MONTGOMERY AVE

City

NORRISTOWN

State

PA

Zip Code

19401

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

293.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.46939

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT A AQUADRO 010

Mailing Address 212 CHESTNUT ST

City

FLORENCE

State

MA

Zip Code

01062

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.46951

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

125.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROBERT A AQUADRO 010

Mailing Address 212 CHESTNUT ST

City

FLORENCE

State

MA

Zip Code

01062

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.46952

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT A AQUADRO 010

Mailing Address 212 CHESTNUT ST

City

FLORENCE

State

MA

Zip Code

01062

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.46953

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CHRIS ARMBRUST 601

Mailing Address 27W320 ROOSEVELT RD

City

WINFIELD

State

IL

Zip Code

60190

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENTREPRENEUR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.46969

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JAMES H ARTHUR 801

Mailing Address 6573 S GLENCOE ST

City
CENTENNIAL

State Zip Code
CO 80121

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.46990

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WALTER BAHLER 479

Mailing Address 5927 S CREEKSIDE CT

City
REMINGTON

State Zip Code
IN 47977

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.47059

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN W BAILEY 372

Mailing Address 11 BURTON HILLS BLVD APT 411

City
NASHVILLE

State Zip Code
TN 37215

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.47063

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 369

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN W BAILEY 372

Mailing Address 11 BURTON HILLS BLVD APT 411

City	State	Zip Code
NASHVILLE	TN	37215

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : SA11AI.47064

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GARY ELDON BAILEY 403

Mailing Address 112 W LINDEN ST

City	State	Zip Code
WILMORE	KY	40390

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

Transaction ID : SA11AI.47065

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LTC OLIVE M BAKER-BROWN 871

Mailing Address 12224 CEDAR RIDGE DR NE

City	State	Zip Code
ALBUQUERQUE	NM	87112

FEC ID number of contributing federal political committee.

C

Name of Employer

US MILITARY

Occupation

OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	6		2	0	1	6

Transaction ID : SA11AI.47090

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

370.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN BALDINGER 160

Mailing Address 299 LINDSAY RD

City
ZELIENOPLE

State Zip Code
PA 16063

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHN BALDINGER INC

Occupation

CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 17 / 2016

Transaction ID : SA11AI.47096

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOHN BALDINGER 160

Mailing Address 299 LINDSAY RD

City
ZELIENOPLE

State Zip Code
PA 16063

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHN BALDINGER INC

Occupation

CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 17 / 2016

Transaction ID : SA11AI.47097

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN BALDINGER 160

Mailing Address 299 LINDSAY RD

City
ZELIENOPLE

State Zip Code
PA 16063

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHN BALDINGER INC

Occupation

CONTRACTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 17 / 2016

Transaction ID : SA11AI.47098

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN BALDINGER 160

Mailing Address 299 LINDSAY RD

City

ZELIENOPLE

State

PA

Zip Code

16063

FEC ID number of contributing
federal political committee.

C

Name of Employer

JOHN BALDINGER INC

Occupation

CONTRACTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.47099

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS CONSTANCE C BARNES 145

Mailing Address 244 LIBERTY ST

City

WARSAW

State

NY

Zip Code

14569

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.47117

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MISS CONSTANCE C BARNES 145

Mailing Address 244 LIBERTY ST

City

WARSAW

State

NY

Zip Code

14569

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

392.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.47118

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS CONSTANCE C BARNES 145

Mailing Address 244 LIBERTY ST

City
WARSAW

State Zip Code
NY 14569

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.47119

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS CONSTANCE C BARNES 145

Mailing Address 244 LIBERTY ST

City
WARSAW

State Zip Code
NY 14569

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.47120

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CECIL BARNETT 402

Mailing Address 126 INDIAN HILLS TRL

City
LOUISVILLE

State Zip Code
KY 40207

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALGOOD FOOD CO

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.47137

Amount of Each Receipt this Period

750.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CHARLIE BARR 960

Mailing Address PO BOX 796

City State Zip Code
 COTTONWOOD CA 96022

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 22 2016

Transaction ID : SA11AI.47142

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHARLIE BARR 960

Mailing Address PO BOX 796

City State Zip Code
 COTTONWOOD CA 96022

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 31 2016

Transaction ID : SA11AI.47143

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS ROSELYN BARRINGHAUS 630

Mailing Address 310 E STATE ST

City State Zip Code
 UNION MO 63084

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 04 2016

Transaction ID : SA11AI.47146

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS ROSELYN BARRINGHAUS 630

Mailing Address 310 E STATE ST

City State Zip Code
UNION MO 63084

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.47147

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS ROSELYN BARRINGHAUS 630

Mailing Address 310 E STATE ST

City State Zip Code
UNION MO 63084

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.47148

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS ROSELYN BARRINGHAUS 630

Mailing Address 310 E STATE ST

City State Zip Code
UNION MO 63084

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.47149

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

78.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 369

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS ROSELYN BARRINGHAUS 630

Mailing Address 310 E STATE ST

City	State	Zip Code
UNION	MO	63084

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	5		2	0	1	6		

Transaction ID : SA11AI.47150

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR KENNETH BARTLETT 293

Mailing Address 324 HEARTHSTONE RIDGE RD

City	State	Zip Code
LANDRUM	SC	29356

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

938.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	6		2	0	1	6		

Transaction ID : SA11AI.47157

Amount of Each Receipt this Period

225.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR KENNETH BARTLETT 293

Mailing Address 324 HEARTHSTONE RIDGE RD

City	State	Zip Code
LANDRUM	SC	29356

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1013.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.47158

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

305.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS KATHRYN L BAUCH 077

Mailing Address 76 WESTON PL

City

EATONTOWN

State

NJ

Zip Code

07724

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.47179

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS KATHRYN L BAUCH 077

Mailing Address 76 WESTON PL

City

EATONTOWN

State

NJ

Zip Code

07724

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.47180

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. PETER BAUMGARTER 564

Mailing Address 21627 OLANDER RD

City

CROSBY

State

MN

Zip Code

56441

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.47191

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR N GERALD BEARD 770

Mailing Address 5765 INDIAN CIR

City
HOUSTONState
TXZip Code
77057FEC ID number of contributing
federal political committee.

C

Name of Employer

BRAVIDA CORP

Occupation

REGISTERED AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.47206

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR N GERALD BEARD 770

Mailing Address 5765 INDIAN CIR

City
HOUSTONState
TXZip Code
77057FEC ID number of contributing
federal political committee.

C

Name of Employer

BRAVIDA CORP

Occupation

REGISTERED AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.47207

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR NORMAN J BEAT 402

Mailing Address 9003 PETERBOROUGH CT

City
LOUISVILLEState
KYZip Code
40222FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.47215

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

360.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS BERTHA BECKER 853

Mailing Address 10330 W TBIRD BLVD APT A316

City	State	Zip Code
SUN CITY	AZ	85351

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	08	/	2016

Transaction ID : SA11AI.47227

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS BERTHA BECKER 853

Mailing Address 10330 W TBIRD BLVD APT A316

City	State	Zip Code
SUN CITY	AZ	85351

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	23	/	2016

Transaction ID : SA11AI.47228

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAM E BECKERMAN 628

Mailing Address 116 FORIO AVE

City	State	Zip Code
MOUNT CARMEL	IL	62863

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	16	/	2016

Transaction ID : SA11AI.47231

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. WILLIAM E BECKERMAN 628

Mailing Address 116 FORIO AVE

City

MOUNT CARMEL

State

IL

Zip Code

62863

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.47232

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DAVID BEECK 520

Mailing Address 3917 110TH ST

City

MILES

State

IA

Zip Code

52064

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.47236

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS NANCY BEVERIDGE 617

Mailing Address 324 W POPLAR ST

City

HEYWORTH

State

IL

Zip Code

61745

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.47357

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. HELEN BEWICK 481

Mailing Address 7510 CONIFER CT

City
TEMPERANCE

State Zip Code
MI 48182

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.47364

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HELEN BEWICK 481

Mailing Address 7510 CONIFER CT

City
TEMPERANCE

State Zip Code
MI 48182

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.47365

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS LITA BIEJO 930

Mailing Address 9555 W LOS ANGELES AVE

City
MOORPARK

State Zip Code
CA 93021

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.47371

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS LITA BIEJO 930

Mailing Address 9555 W LOS ANGELES AVE

City State Zip Code
 MOORPARK CA 93021

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 29 2016

Transaction ID : SA11AI.47372

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DION SCOTT BIRNEY 024 JR

Mailing Address 11 SAGAMORE RD

City State Zip Code
 WELLESLEY HILLS MA 02481

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 11 2016

Transaction ID : SA11AI.47395

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DION SCOTT BIRNEY 024 JR

Mailing Address 11 SAGAMORE RD

City State Zip Code
 WELLESLEY HILLS MA 02481

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 15 2016

Transaction ID : SA11AI.47396

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KEITH BLESSING 461

Mailing Address 4637 W DIVISION RD

City State Zip Code
 MORGANTOWN IN 46160

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : SA11AI.47440

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR KEITH BLESSING 461

Mailing Address 4637 W DIVISION RD

City State Zip Code
 MORGANTOWN IN 46160

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11AI.47441

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR KEITH BLESSING 461

Mailing Address 4637 W DIVISION RD

City State Zip Code
 MORGANTOWN IN 46160

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11AI.47442

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KEITH BLESSING 461

Mailing Address 4637 W DIVISION RD

City

MORGANTOWN

State

IN

Zip Code

46160

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

401.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.47443

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR KEITH BLESSING 461

Mailing Address 4637 W DIVISION RD

City

MORGANTOWN

State

IN

Zip Code

46160

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

436.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.47444

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR KEITH BLESSING 461

Mailing Address 4637 W DIVISION RD

City

MORGANTOWN

State

IN

Zip Code

46160

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

486.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.47445

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS JULIE BOSTWICK 992

Mailing Address 5819 N VISTA LN

City

SPOKANE

State

WA

Zip Code

99212

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

310.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.47539

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR TED BOWMAN 344

Mailing Address 2440 NE 7TH ST

City

OCALA

State

FL

Zip Code

34470

FEC ID number of contributing
federal political committee.

C

Name of Employer

TED BOWMAN INC

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.47564

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DR DAVID B BOWMAN 857 MD

Mailing Address PO BOX 41806

City

TUCSON

State

AZ

Zip Code

85717

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INTERNIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.47569

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

410.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ELDON G BOWMAN 863

Mailing Address 256 MAHOGANY LN

City
PRESCOTTState Zip Code
AZ 86303FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	8			2	0	1	6		

Transaction ID : SA11AI.47570

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR CHARLES A BOYDEN 977

Mailing Address 846 NE OCHOCO AVE

City
PRINEVILLEState Zip Code
OR 97754FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	6			2	0	1	6		

Transaction ID : SA11AI.47582

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILLIAM O BRACHMAN 530

Mailing Address 10101 CEDAR CREEK RD

City
CEDARBURGState Zip Code
WI 53012FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	5			2	0	1	6		

Transaction ID : SA11AI.47595

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN L BRANDT 557

Mailing Address 2129 12TH AVE E

City
HIBBINGState
MNZip Code
55746FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	17	/	2016

Transaction ID : SA11AI.47618

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARJORIE BRASHEAR 917

Mailing Address 10162 LYNROSE ST

City

TEMPLE CITY

State

CA

Zip Code

91780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1750.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	29	/	2016

Transaction ID : SA11AI.47626

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS MARJORIE BRASHEAR 917

Mailing Address 10162 LYNROSE ST

City

TEMPLE CITY

State

CA

Zip Code

91780

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	29	/	2016

Transaction ID : SA11AI.47627

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

600.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HAROLD BRIMER 218

Mailing Address 3535 POCOMOKE RD

City
SALISBURY

State Zip Code
MD 21804

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.47663

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DAVID BRITTAIN 130

Mailing Address 5270 HOAG LN

City
FAYETTEVILLE

State Zip Code
NY 13066

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEALTH SYSTEMS MANAGEMENT

Occupation

HEALTH QUALITY REVIEWER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.47674

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS KATHRYN M BROWN 295

Mailing Address PO BOX 815

City
LAKE CITY

State Zip Code
SC 29560

FEC ID number of contributing
federal political committee.

C

Name of Employer

BROWN ANIMAL HOSPITAL

Occupation

BOOKKEEPER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.47721

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

385.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MABEL BROWN 612

Mailing Address 115 N STATE ST

City State Zip Code
GENESEO IL 61254

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

LAWYER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.47727

Amount of Each Receipt this Period

125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT M BRUCE 891

Mailing Address 6420 E TROPICANA AVE UNIT 442

City State Zip Code
LAS VEGAS NV 89122

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.47737

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ORABELLE BRUNEAU 971

Mailing Address 1 3RD ST UNIT 209

City State Zip Code
ASTORIA OR 97103

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.47739

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

215.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS SUSAN BRUNOFF 175

Mailing Address 334 W CEDAR ST

City

NEW HOLLAND

State

PA

Zip Code

17557

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1901.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	1	6

Transaction ID : SA11AI.47742

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS SUSAN BRUNOFF 175

Mailing Address 334 W CEDAR ST

City

NEW HOLLAND

State

PA

Zip Code

17557

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

1951.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

Transaction ID : SA11AI.47743

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS SUSAN BRUNOFF 175

Mailing Address 334 W CEDAR ST

City

NEW HOLLAND

State

PA

Zip Code

17557

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

2056.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	6

Transaction ID : SA11AI.47744

Amount of Each Receipt this Period

105.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

255.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS SUSAN BRUNOFF 175

Mailing Address 334 W CEDAR ST

City State Zip Code
 NEW HOLLAND PA 17557

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2156.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11AI.47745

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DR ROBERT D BUCHANAN 810

Mailing Address 4751 EAGLERIDGE CIR APT 108

City State Zip Code
 PUEBLO CO 81008

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11AI.47752

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ELDON L BUCKNER 978

Mailing Address 13967 HUNT MOUNTAIN LN

City State Zip Code
 BAKER CITY OR 97814

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.47762

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. GLENN BUFFUM 980

Mailing Address 6405 156TH PL NE

City State Zip Code
 REDMOND WA 98052

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.47771

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WILLIAM BURDINE 923

Mailing Address 46833 VALLEY CENTER RD

City State Zip Code
 NEWBERRY SPGS CA 92365

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.47801

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR STEPHEN H BURNS 045

Mailing Address 78 CUSHING RD

City State Zip Code
 FRIENDSHIP ME 04547

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.47817

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM F BURT 017

Mailing Address 1 HARVEST CIR STE 003

City State Zip Code
 LINCOLN MA 01773

FEC ID number of contributing
federal political committee.

C

Name of Employer

THOMSEN REUTERS

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.47828

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WILLIAM F BURT 017

Mailing Address 1 HARVEST CIR STE 003

City State Zip Code
 LINCOLN MA 01773

FEC ID number of contributing
federal political committee.

C

Name of Employer

THOMSEN REUTERS

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.47829

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DARRELL D BUTTERWICK 551

Mailing Address 1694 KERRY LN

City State Zip Code
 SAINT PAUL MN 55125

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.47865

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JACK BUZBEE 629

Mailing Address 200 E DOUGLAS ST

City

DE SOTO

State

IL

Zip Code

62924

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.47867

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JACK BUZBEE 629

Mailing Address 200 E DOUGLAS ST

City

DE SOTO

State

IL

Zip Code

62924

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.47868

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FLORENCE CALAMARI 087

Mailing Address 4 GREENWAYS LN

City

LAKEWOOD

State

NJ

Zip Code

08701

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

305.00

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.47890

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS LORENE CALL 460

Mailing Address 1515 S ANDERSON ST

City State Zip Code
ELWOOD IN 46036

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.47896

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS LAURA CAMERON 309

Mailing Address 3258 SUMMERCHASE CIR

City State Zip Code
AUGUSTA GA 30909

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.47908

Amount of Each Receipt this Period

28.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES CAMPBELL 902

Mailing Address 227 VIA ANITA

City State Zip Code
REDONDO BEACH CA 90277

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.47920

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS SUE M CANNON 802

Mailing Address 6420 W LAKERIDGE RD

City

LAKEWOOD

State

CO

Zip Code

80227

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

790.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.47931

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR GEORGE W CAPPS 368

Mailing Address 5194 US HIGHWAY 80 W

City

OPELIKA

State

AL

Zip Code

36804

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

HARDWARE STORE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.47939

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN CARSON 840

Mailing Address 696 ROSEWOOD LN

City

LAYTON

State

UT

Zip Code

84041

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

379.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.47973

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

385.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR FRANCIS CARTER 240

Mailing Address 359 VEST TANNERY RD NE

City State Zip Code
 CHECK VA 24072

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.47974

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS ANN E CAVENDER 975

Mailing Address 235 MT ECHO DR

City State Zip Code
 MEDFORD OR 97504

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.48024

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOSEPH S CEO 405

Mailing Address 982 CELIA LN

City State Zip Code
 LEXINGTON KY 40504

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 01 2016

Transaction ID : SA11AI.48033

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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603.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOSEPH S CEO 405

Mailing Address 982 CELIA LN

City	State	Zip Code
LEXINGTON	KY	40504

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		01		2016

Transaction ID : SA11AI.48034

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOSEPH S CEO 405

Mailing Address 982 CELIA LN

City	State	Zip Code
LEXINGTON	KY	40504

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		16		2016

Transaction ID : SA11AI.48035

Amount of Each Receipt this Period

57.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IMOGENE K CHAMBERLAIN 798

Mailing Address PO BOX 1583

City	State	Zip Code
ALPINE	TX	79831

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		29		2016

Transaction ID : SA11AI.48040

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

242.00

TOTAL This Period (last page this line number only)..... ▶

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Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS MARGARET A CHAPPELL 079

Mailing Address 22 PRINCETON CT

City State Zip Code
BASKING RIDGE NJ 07920

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 01 2016

Transaction ID : SA11AI.48057

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RALPH N CHILDS 606

Mailing Address 5757 W WARWICK AVE

City State Zip Code
CHICAGO IL 60634

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 08 2016

Transaction ID : SA11AI.48079

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JOAN K CHITIEA 920

Mailing Address 1950 SILVERLEAF CIR UNIT 138

City State Zip Code
CARLSBAD CA 92009

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 19 2016

Transaction ID : SA11AI.48082

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

160.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ARTHUR B CHOATE 331

Mailing Address 1390 S DIXIE HWY

City State Zip Code
 CORAL GABLES FL 33146

FEC ID number of contributing
federal political committee.

C

Name of Employer

ART MARINA

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 05 2016

Transaction ID : SA11AI.48083

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ARTHUR B CHOATE 331

Mailing Address 1390 S DIXIE HWY

City State Zip Code
 CORAL GABLES FL 33146

FEC ID number of contributing
federal political committee.

C

Name of Employer

ART MARINA

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 05 2016

Transaction ID : SA11AI.48084

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARY CHUA 140

Mailing Address 8 HILLSIDE DR

City State Zip Code
 BATAVIA NY 14020

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 12 2016

Transaction ID : SA11AI.48091

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1035.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ALYCE V CLARK 644

Mailing Address 1014 W EDWARDS ST

City

MARYVILLE

State

MO

Zip Code

64468

FEC ID number of contributing
federal political committee.

C

Name of Employer

US AIR FORCE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.48118

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ELLOINE M CLARK 752

Mailing Address 3716 MAPLEWOOD AVE

City

DALLAS

State

TX

Zip Code

75205

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6750.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.48119

Amount of Each Receipt this Period

1000.00

☐ Memo Item

CONTRIBUTION IS UNDER REVIEW

Full Name (Last, First, Middle Initial)

C. KIRK CLARK 785

Mailing Address PO BOX 938

City

MCALLEN

State

TX

Zip Code

78505

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.48120

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS CHARLENE CLAY 802

Mailing Address 172 S AMMONS ST

City

LAKEWOOD

State

CO

Zip Code

80226

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.48131

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR LAWRENCE CLEEK 988

Mailing Address 1111 BROWN ST

City

WENATCHEE

State

WA

Zip Code

98801

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.48133

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR LAWRENCE CLEEK 988

Mailing Address 1111 BROWN ST

City

WENATCHEE

State

WA

Zip Code

98801

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.48134

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CHARLES CLINTON 152 JR

Mailing Address 5103 MORNINGRISE DR

City

PITTSBURGH

State

PA

Zip Code

15236

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.48139

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ELEANOR COBB 900

Mailing Address 131 S VISTA ST

City

LOS ANGELES

State

CA

Zip Code

90036

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.48152

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ELEANOR COBB 900

Mailing Address 131 S VISTA ST

City

LOS ANGELES

State

CA

Zip Code

90036

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.48153

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

600.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR FRANCIS COLE 380 JR

Mailing Address 6195 BOSKEY DR

City
MILLINGTON

State Zip Code
TN 38053

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARINE ENGINEER

Occupation
MARINE ENGINEER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.48176

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. REV ELMER COLLINS 342

Mailing Address 16 QUAILS RUN BLVD UNIT 3

City
ENGLEWOOD

State Zip Code
FL 34223

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF EMPLOYED

Occupation
CLERGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.48186

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS PATRICIA R CONKIE 895

Mailing Address 202 RIVER FRONT DR

City
RENO

State Zip Code
NV 89523

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.48205

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

475.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS KATHERINE COOK 757

Mailing Address PO BOX 130548

City State Zip Code
 TYLER TX 75713

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 23 2016

Transaction ID : SA11AI.48224

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS KATHERINE COOK 757

Mailing Address PO BOX 130548

City State Zip Code
 TYLER TX 75713

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 25 2016

Transaction ID : SA11AI.48225

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR A COOK 931 III

Mailing Address 1816 SANTA BARBARA ST

City State Zip Code
 SANTA BARBARA CA 93101

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.48229

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

425.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM COOPER 301

Mailing Address PO BOX 67

City

DALLAS

State

GA

Zip Code

30132

FEC ID number of contributing
federal political committee.

C

Name of Employer

PROFESSIONAL CONSULTING SERVICES

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.48236

Amount of Each Receipt this Period

57.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS ISABELLE COOVERT 631

Mailing Address 2 DEACON DR

City

SAINT LOUIS

State

MO

Zip Code

63131

FEC ID number of contributing
federal political committee.

C

Name of Employer

GERMAN AMERICAN HERITAGE SOCIETY

Occupation

VICE PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.48253

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JANE COPSEY 644

Mailing Address PO BOX 185

City

MAITLAND

State

MO

Zip Code

64466

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOUSEWIFE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.48261

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

407.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DORA CORBETT 841

Mailing Address 3248 JASON PL

City

SALT LAKE CTY

State

UT

Zip Code

84119

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

345.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.48264

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DORA CORBETT 841

Mailing Address 3248 JASON PL

City

SALT LAKE CTY

State

UT

Zip Code

84119

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.48265

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VIRGINIA COX 240 DO

Mailing Address 1563 MOUNT TABOR RD

City

BLACKSBURG

State

VA

Zip Code

24060

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.48310

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. VIRGINIA COX 240 DO

Mailing Address 1563 MOUNT TABOR RD

City State Zip Code
 BLACKSBURG VA 24060

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.48311

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. VIRGINIA COX 240 DO

Mailing Address 1563 MOUNT TABOR RD

City State Zip Code
 BLACKSBURG VA 24060

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.48312

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VIRGINIA COX 240 DO

Mailing Address 1563 MOUNT TABOR RD

City State Zip Code
 BLACKSBURG VA 24060

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

465.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.48313

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

40.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS NANCY COX 787

Mailing Address 2500 BARTON CREEK BLVD APT 2205

City State Zip Code
 AUSTIN TX 78735

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.48324

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DONALD CRABB 327

Mailing Address 524 NUTMEG CIR

City State Zip Code
 DELAND FL 32724

FEC ID number of contributing federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016

Transaction ID : SA11AI.48330

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. REV BARTON CRAIG 190

Mailing Address 3240 ADAMS CT

City State Zip Code
 BENSALEM PA 19020

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CLERGY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11AI.48331

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

295.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR LINCOLN W CRAIGHEAD 068

Mailing Address 175 BARLOW RD

City

FAIRFIELD

State

CT

Zip Code

06824

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.48333

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DONALD CRAWFORD 194

Mailing Address PO BOX 3003

City

BLUE BELL

State

PA

Zip Code

19422

FEC ID number of contributing
federal political committee.

C

Name of Employer

CRAWFORD BROADCASTING CO

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.48346

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROBERT CROSSMAN 339

Mailing Address 8201 ARBOR CT

City

FORT MYERS

State

FL

Zip Code

33908

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.48372

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS JANE ANN CURTO 605

Mailing Address 203 BURR RIDGE CLUB DR

City State Zip Code
 BURR RIDGE IL 60527

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016

Transaction ID : SA11AI.48413

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DALLAS DAGENAIS 483

Mailing Address 2931 BARKMAN DR

City State Zip Code
 WATERFORD MI 48329

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.48430

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS PAT DAHLSTEDT 982

Mailing Address 13048 FARM TO MARKET RD

City State Zip Code
 MOUNT VERNON WA 98273

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : SA11AI.48435

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS PAT DAHLSTEDT 982

Mailing Address 13048 FARM TO MARKET RD

City State Zip Code
MOUNT VERNON WA 98273

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.48436

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS DARLENE DANIEL 970

Mailing Address 407 SE 42ND CIR

City State Zip Code
TROUTDALE OR 97060

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.48465

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS DARLENE DANIEL 970

Mailing Address 407 SE 42ND CIR

City State Zip Code
TROUTDALE OR 97060

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.48466

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

335.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS CHARLOTTE DANLY 050

Mailing Address PO BOX 606

City

WOODSTOCK

State

VT

Zip Code

05091

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.48478

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS R JUNE DAVIS 315

Mailing Address 316 OSPREY CIR

City

SAINT MARYS

State

GA

Zip Code

31558

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.48509

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS NANCY W DAY 631

Mailing Address 1 MCKNIGHT PL APT 144

City

SAINT LOUIS

State

MO

Zip Code

63124

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

202.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.48539

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS NANCY W DAY 631

Mailing Address 1 MCKNIGHT PL APT 144

City State Zip Code
 SAINT LOUIS MO 63124

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.48540

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DAVID DEARBORN 019

Mailing Address 16 BEAVER POND RD

City State Zip Code
 BEVERLY MA 01915

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.48560

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROSEMARY DECAMP 494

Mailing Address 18070 HAMMOND BAY ST

City State Zip Code
 SPRING LAKE MI 49456

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 25 2016

Transaction ID : SA11AI.48568

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS HELEN R DECKER 760

Mailing Address PO BOX 170009

City

ARLINGTON

State

TX

Zip Code

76003

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.48574

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR PAUL DECLEVA 752

Mailing Address 5222 DELOACHE AVE

City

DALLAS

State

TX

Zip Code

75220

FEC ID number of contributing
federal political committee.

C

Name of Employer

DP CONSULTANTS

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.48575

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DONALD A DENECKE 070

Mailing Address 500 PARKWAY DR #14G

City

EAST ORANGE

State

NJ

Zip Code

07017

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.48618

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD A DENECKE 070

Mailing Address 500 PARKWAY DR #14G

City State Zip Code
 EAST ORANGE NJ 07017

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.48619

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARGIE D DENISON 841

Mailing Address 3807 S HIGHLAND COVE LN APT E15

City State Zip Code
 SALT LAKE CITY UT 84106

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.48623

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WILSON DENNEHY 801

Mailing Address 5753 SOUTHMOOR LN

City State Zip Code
 ENGLEWOOD CO 80111

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.48626

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS BARBARA A DE SAUSSURE 945

Mailing Address 3842 BROOKDALE BLVD

City State Zip Code
 CASTRO VALLEY CA 94546

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.48551

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS ROSEMARY DEVITO 130

Mailing Address 3226 HOLLY RDG

City State Zip Code
 BALDWINVILLE NY 13027

FEC ID number of contributing
federal political committee.

C

Name of Employer

KPMG LLP

Occupation

PARTNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11AI.48644

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JANET S DEY 481

Mailing Address 29968 MARQUETTE ST

City State Zip Code
 GARDEN CITY MI 48135

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.48652

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

595.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR GONZALO DIAZ 331

Mailing Address 5520 SW 72ND AVE

City State Zip Code
 MIAMI FL 33155

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016

Transaction ID : SA11AI.48653

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR HERBERT DIVELBLISS 155

Mailing Address 4242 PLEASANT VALLEY RD

City State Zip Code
 CRYSTAL SPG PA 15536

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

760.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.48684

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR GLENN L DOBBINS 990

Mailing Address 13501 S BETZ RD

City State Zip Code
 CHENEY WA 99004

FEC ID number of contributing
federal political committee.

C

Name of Employer

FERTILE VALLEY FARMS INC

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.48688

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR GLENN L DOBBINS 990

Mailing Address 13501 S BETZ RD

City
CHENEY

State Zip Code
WA 99004

FEC ID number of contributing
federal political committee.

C

Name of Employer

FERTILE VALLEY FARMS INC

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

383.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.48689

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR GLENN L DOBBINS 990

Mailing Address 13501 S BETZ RD

City
CHENEY

State Zip Code
WA 99004

FEC ID number of contributing
federal political committee.

C

Name of Employer

FERTILE VALLEY FARMS INC

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

463.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.48690

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR GLENN L DOBBINS 990

Mailing Address 13501 S BETZ RD

City
CHENEY

State Zip Code
WA 99004

FEC ID number of contributing
federal political committee.

C

Name of Employer

FERTILE VALLEY FARMS INC

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.48691

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR GLENN L DOBBINS 990

Mailing Address 13501 S BETZ RD

City
CHENEY

State
WA

Zip Code
99004

FEC ID number of contributing
federal political committee.

C

Name of Employer

FERTILE VALLEY FARMS INC

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.48692

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS SHIRLEY DORMAN 444

Mailing Address 303 N MECCA ST APT 302

City

CORTLAND

State

OH

Zip Code

44410

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.48710

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS DOLORES DORR 473

Mailing Address 1416 LINDEN DR

City

NEW CASTLE

State

IN

Zip Code

47362

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.48715

Amount of Each Receipt this Period

70.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS DOLORES DORR 473

Mailing Address 1416 LINDEN DR

City

NEW CASTLE

State

IN

Zip Code

47362

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.48716

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS DOLORES DORR 473

Mailing Address 1416 LINDEN DR

City

NEW CASTLE

State

IN

Zip Code

47362

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.48717

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS LORETTA DOSH 485

Mailing Address 3085 N GENESEE RD APT 214

City

FLINT

State

MI

Zip Code

48506

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.48718

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. EDITH DOUGHTY 770

Mailing Address 1038 IVY WALL DR

City
HOUSTONState
TXZip Code
77079FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : SA11AI.48723

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS SUE DOWLING 315

Mailing Address 4841 VERA CIR

City
WAYCROSSState
GAZip Code
31503FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	6

Transaction ID : SA11AI.48738

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS MARTHA L DOWNS 956

Mailing Address 8560 JESTER CT

City
ELK GROVEState
CAZip Code
95624FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

Transaction ID : SA11AI.48741

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

385.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS MARTHA L DOWNS 956

Mailing Address 8560 JESTER CT

City

ELK GROVE

State

CA

Zip Code

95624

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.48742

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARTHA L DOWNS 956

Mailing Address 8560 JESTER CT

City

ELK GROVE

State

CA

Zip Code

95624

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.48743

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR HENRY T DUNBAR 995

Mailing Address 2412 LEE ST

City

ANCHORAGE

State

AK

Zip Code

99504

FEC ID number of contributing
federal political committee.

C

Name of Employer

HANK'S TAXIDERMY

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.48794

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

145.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR H R DUNLAP 230 JR

Mailing Address 989 SHOOTING BOX RD

City
KING WILLIAM

State Zip Code
VA 23086

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.48799

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARGARET EAGLE 596

Mailing Address 506 SADDLE DR

City
HELENA

State Zip Code
MT 59601

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.48827

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EDWARD M EASTMAN 339

Mailing Address 873 W TARPON BLVD NW

City
PORT CHARLOTTE

State Zip Code
FL 33952

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.48839

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JACK ECKMAN 917

Mailing Address 11216 EMERY ST

City

EL MONTE

State

CA

Zip Code

91731

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.48856

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS DOREEN EDWARDS 478

Mailing Address 1120 E DAVIS DR APT A503

City

TERRE HAUTE

State

IN

Zip Code

47802

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

273.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.48866

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS DOREEN EDWARDS 478

Mailing Address 1120 E DAVIS DR APT A503

City

TERRE HAUTE

State

IN

Zip Code

47802

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

353.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.48867

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

310.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR MARTIN ELLBOGEN 826

Mailing Address 1420 BROOKVIEW DR

City
CASPER

State Zip Code
WY 82604

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.48901

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RONALD ELLIS 112

Mailing Address 2340 E 17TH ST

City
BROOKLYN

State Zip Code
NY 11229

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.48910

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH L ENDRES 488

Mailing Address 1013 SWEENEY ST

City
MT PLEASANT

State Zip Code
MI 48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.48947

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ELIZABETH L ENDRES 488

Mailing Address 1013 SWEENEY ST

City

MT PLEASANT

State

MI

Zip Code

48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

254.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.48948

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH L ENDRES 488

Mailing Address 1013 SWEENEY ST

City

MT PLEASANT

State

MI

Zip Code

48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

289.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.48949

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH L ENDRES 488

Mailing Address 1013 SWEENEY ST

City

MT PLEASANT

State

MI

Zip Code

48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.48950

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

105.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ELIZABETH L ENDRES 488

Mailing Address 1013 SWEENEY ST

City

MT PLEASANT

State

MI

Zip Code

48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

359.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.48951

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ELIZABETH L ENDRES 488

Mailing Address 1013 SWEENEY ST

City

MT PLEASANT

State

MI

Zip Code

48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

412.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.48952

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELIZABETH L ENDRES 488

Mailing Address 1013 SWEENEY ST

City

MT PLEASANT

State

MI

Zip Code

48858

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

437.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.48953

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

113.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS JEAN ENGLAND 614

Mailing Address 576 KNOX ROAD 1300 E

City
MAQUON

State Zip Code
IL 61458

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.48957

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROY A EVERITT 358

Mailing Address 11307 CHICAMAUGA TRL SE

City
HUNTSVILLE

State Zip Code
AL 35803

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.49020

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROY A EVERITT 358

Mailing Address 11307 CHICAMAUGA TRL SE

City
HUNTSVILLE

State Zip Code
AL 35803

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.49021

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR BILL FAIN 863

Mailing Address 3001 N MAIN ST STE 2B

City State Zip Code
 PRESCOTT VALLEY AZ 86314

FEC ID number of contributing federal political committee.

C

Name of Employer

RANCH LAND & INVESTMENTS LLC

Occupation

CATTLEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.49036

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR BILL FAIN 863

Mailing Address 3001 N MAIN ST STE 2B

City State Zip Code
 PRESCOTT VALLEY AZ 86314

FEC ID number of contributing federal political committee.

C

Name of Employer

RANCH LAND & INVESTMENTS LLC

Occupation

CATTLEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.49037

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR BILL FAIN 863

Mailing Address 3001 N MAIN ST STE 2B

City State Zip Code
 PRESCOTT VALLEY AZ 86314

FEC ID number of contributing federal political committee.

C

Name of Employer

RANCH LAND & INVESTMENTS LLC

Occupation

CATTLEMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11AI.49038

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. S JIM FARHA 672

Mailing Address 1313 N WEBB RD STE 240

City
WICHITA

State Zip Code
KS 67206

FEC ID number of contributing
federal political committee.

C

Name of Employer
JIM & DARLA FARHA FOUNDATION

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.49045

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR GEORGE FAULK 281

Mailing Address 2025 STONEY POINT CIR

City
MONROE

State Zip Code
NC 28112

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.49067

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LTC SAM FAULK 974

Mailing Address 2530 ASH ST

City
NORTH BEND

State Zip Code
OR 97459

FEC ID number of contributing
federal political committee.

C

Name of Employer
US MILITARY

Occupation
OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.49071

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LTC SAM FAULK 974

Mailing Address 2530 ASH ST

City	State	Zip Code
NORTH BEND	OR	97459

FEC ID number of contributing
federal political committee.

C

Name of Employer

US MILITARY

Occupation

OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	6

Transaction ID : SA11AI.49072

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROBERT A FEIGENBAUM 941

Mailing Address 125 3RD AVE APT 5

City	State	Zip Code
SAN FRANCISCO	CA	94118

FEC ID number of contributing
federal political committee.

C

Name of Employer

EARTHLINK

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

Transaction ID : SA11AI.49090

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROBERT A FEIGENBAUM 941

Mailing Address 125 3RD AVE APT 5

City	State	Zip Code
SAN FRANCISCO	CA	94118

FEC ID number of contributing
federal political committee.

C

Name of Employer

EARTHLINK

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	6

Transaction ID : SA11AI.49091

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

180.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ROBERT A FEIGENBAUM 941

Mailing Address 125 3RD AVE APT 5

City State Zip Code
 SAN FRANCISCO CA 94118

FEC ID number of contributing
federal political committee.

C

Name of Employer

EARTHLINK

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 / 25 / 2016

Transaction ID : SA11AI.49092

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR TOM FENCL 973

Mailing Address 48278 SW KINGWOOD AVE

City State Zip Code
 MILL CITY OR 97360

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

515.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 / 05 / 2016

Transaction ID : SA11AI.49103

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR TOM FENCL 973

Mailing Address 48278 SW KINGWOOD AVE

City State Zip Code
 MILL CITY OR 97360

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 / 08 / 2016

Transaction ID : SA11AI.49104

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

190.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR TOM FENCL 973

Mailing Address 48278 SW KINGWOOD AVE

City State Zip Code
MILL CITY OR 97360

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.49105

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR BILLIE A FENDER 320 III

Mailing Address 10676 US HIGHWAY 129

City State Zip Code
LIVE OAK FL 32060

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

507.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.49106

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES FENTON 616

Mailing Address 6416 N TAMMARACK LN

City State Zip Code
PEORIA IL 61615

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.49110

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 369

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES FENTON 616

Mailing Address 6416 N TAMMARACK LN

City
PEORIAState
ILZip Code
61615FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	1	6

Transaction ID : SA11AI.49111

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BARBARA FITTS 983

Mailing Address 361 E SILBERHORN RD

City
SEQUIMState
WAZip Code
98382FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	6

Transaction ID : SA11AI.49177

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BARBARA FITTS 983

Mailing Address 361 E SILBERHORN RD

City
SEQUIMState
WAZip Code
98382FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	6

Transaction ID : SA11AI.49178

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROYCE FLANDRO 846

Mailing Address 2949 APACHE WAY

City State Zip Code
 PROVO UT 84604

FEC ID number of contributing
federal political committee.

C

Name of Employer
 BRIGHAM YOUNG UNIVERSITY

Occupation
 PROFESSOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 23 2016

Transaction ID : SA11AI.49190

Amount of Each Receipt this Period

170.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JANE G FLYNN 945

Mailing Address 1840 TICE CREEK DR APT 2105

City State Zip Code
 WALNUT CREEK CA 94595

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 24 2016

Transaction ID : SA11AI.49211

Amount of Each Receipt this Period

113.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JOAN FOERSTER 917

Mailing Address 1882 FERNRIDGE DR

City State Zip Code
 SAN DIMAS CA 91773

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 17 2016

Transaction ID : SA11AI.49212

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

583.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ARLENE FOSS 676

Mailing Address 23222 ROAD E3

City State Zip Code
 LENORA KS 67645

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 05 / 2016

Transaction ID : SA11AI.49230

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ARLENE FOSS 676

Mailing Address 23222 ROAD E3

City State Zip Code
 LENORA KS 67645

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.49231

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS PAUL FOSTER 815

Mailing Address 2476 WELLINGTON CT

City State Zip Code
 GRAND JUNCTION CO 81501

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : SA11AI.49236

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

205.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CHARLES FOX 926

Mailing Address 19031 SPICEWOOD LN

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer

XEROX

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.49259

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR CHARLES FOX 926

Mailing Address 19031 SPICEWOOD LN

City State Zip Code
HUNTINGTON BEACH CA 92648

FEC ID number of contributing
federal political committee.

C

Name of Employer

XEROX

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.49260

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS BOULDIN FRANTZ 240

Mailing Address 7764 OLD MILL FOREST DR

City State Zip Code
ROANOKE VA 24018

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.49269

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

700.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 369

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM P FREEMAN 921

Mailing Address 615 C ST # 230

City	State	Zip Code
SAN DIEGO	CA	92101

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	6		2	0	1	6		

Transaction ID : SA11AI.49286

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MILDRED FREEMAN 940

Mailing Address 1395 MONTCLAIRE WAY

City	State	Zip Code
LOS ALTOS	CA	94024

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.49287

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ROSE FREEMAN 974

Mailing Address 94532 GOLF COURSE LN

City	State	Zip Code
NORTH BEND	OR	97459

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	2		2	0	1	6		

Transaction ID : SA11AI.49288

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

185.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ROSE FREEMAN 974

Mailing Address 94532 GOLF COURSE LN

City

NORTH BEND

State

OR

Zip Code

97459

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	5			2	0	1	6		

Transaction ID : SA11AI.49289

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOHN FREUDENSTEIN 321

Mailing Address 75 TROPICAL FALLS DR

City

ORMOND BEACH

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	1	6		

Transaction ID : SA11AI.49293

Amount of Each Receipt this Period

163.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN FREUDENSTEIN 321

Mailing Address 75 TROPICAL FALLS DR

City

ORMOND BEACH

State

FL

Zip Code

32174

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	1			2	0	1	6		

Transaction ID : SA11AI.49294

Amount of Each Receipt this Period

40.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

238.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS JEAN R GAGLIARDI 105

Mailing Address PO BOX 125

City State Zip Code
DOBBS FERRY NY 10522

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11AI.49345

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS JEAN R GAGLIARDI 105

Mailing Address PO BOX 125

City State Zip Code
DOBBS FERRY NY 10522

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.49346

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MISS JEAN R GAGLIARDI 105

Mailing Address PO BOX 125

City State Zip Code
DOBBS FERRY NY 10522

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.49347

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS JEAN R GAGLIARDI 105

Mailing Address PO BOX 125

City

DOBBS FERRY

State

NY

Zip Code

10522

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.49348

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS SHIRLEY A GAIN 496

Mailing Address 4269 S INDEPENDENCE DR

City

SUTTONS BAY

State

MI

Zip Code

49682

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.49349

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS SHIRLEY A GAIN 496

Mailing Address 4269 S INDEPENDENCE DR

City

SUTTONS BAY

State

MI

Zip Code

49682

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.49350

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 87 OF 369
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. BRIAN GALLAGHER 341

Mailing Address 681 W ELKCAM CIR #324

City	State	Zip Code
MARCO ISLAND	FL	34145

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	5		2	0	1	6		

Transaction ID : SA11AI.49353

Amount of Each Receipt this Period

67.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MICHAEL A GALLUCCI 900

Mailing Address 2567 WESTRIDGE RD

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	1		2	0	1	6		

Transaction ID : SA11AI.49361

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MICHAEL A GALLUCCI 900

Mailing Address 2567 WESTRIDGE RD

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	8		2	0	1	6		

Transaction ID : SA11AI.49362

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MICHAEL A GALLUCCI 900

Mailing Address 2567 WESTRIDGE RD

City

LOS ANGELES

State

CA

Zip Code

90049

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

407.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.49363

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MIKE C GARCIA 950

Mailing Address 10121 ORANGE AVE

City

CUPERTINO

State

CA

Zip Code

95014

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

248.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.49381

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS BETTY GARDNER 648

Mailing Address 1572 GOODIN HOLLOW RD

City

NOEL

State

MO

Zip Code

64854

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2080.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.49386

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS BETTY GARDNER 648

Mailing Address 1572 GOODIN HOLLOW RD

City State Zip Code
 NOEL MO 64854

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 23 2016

Transaction ID : SA11AI.49387

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ROSEMARY GARMANN 452

Mailing Address 5349 JULMAR DR

City State Zip Code
 CINCINNATI OH 45238

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 24 2016

Transaction ID : SA11AI.49391

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RICHARD N GEORGE 145

Mailing Address 1 SINCLAIR DR APT 218

City State Zip Code
 PITTSFORD NY 14534

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 30 2016

Transaction ID : SA11AI.49443

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS ALICE GERLEVE 669

Mailing Address 505 E ELM ST

City

HANOVER

State

KS

Zip Code

66945

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.49453

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS NANCY GERRISH 190

Mailing Address 2302 WOODSIDE LN

City

NEWTOWN SQUARE

State

PA

Zip Code

19073

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.49454

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS NANCY GERRISH 190

Mailing Address 2302 WOODSIDE LN

City

NEWTOWN SQUARE

State

PA

Zip Code

19073

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 17 / 2016

Transaction ID : SA11AI.49455

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

95.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS NANCY GERRISH 190

Mailing Address 2302 WOODSIDE LN

City State Zip Code
 NEWTOWN SQUARE PA 19073

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.49456

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. PHYLLIS GESING 503

Mailing Address 1330 19TH ST APT 118

City State Zip Code
 DES MOINES IA 50314

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.49459

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN STANLEY GIBBS 748

Mailing Address 715 EASTERN HILLS RD

City State Zip Code
 HOLDENVILLE OK 74848

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.49473

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MARK E GILLIAM 711

Mailing Address 400 TRAVIS ST STE 1700

City
SHREVEPORT

State Zip Code
LA 71101

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.49502

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RUTH R GLANCY 482

Mailing Address 40 PRESTON PL

City
GROSSE POINTE FARM

State Zip Code
MI 48236

FEC ID number of contributing
federal political committee.

C

Name of Employer

UNIVERSITY LIGGETT SCHOOL

Occupation

MEMBER OF THE BOARD

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.49519

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN A GLORIOD 809

Mailing Address 4155 STONE MANOR HTS

City
COLORADO SPRINGS

State Zip Code
CO 80906

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REALTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.49533

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

950.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR C GOFF 746

Mailing Address 220 W HARTFORD AVE

City State Zip Code
 PONCA CITY OK 74601

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.09

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 25 2016

Transaction ID : SA11AI.49570

Amount of Each Receipt this Period

25.47

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS DOROTHY GOLDAMMER 785

Mailing Address 5401 W BUSINESS 83

City State Zip Code
 HARLINGEN TX 78552

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 19 2016

Transaction ID : SA11AI.49573

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELSIE GONSHOLT 809

Mailing Address 2330 WOOD AVE

City State Zip Code
 COLORADO SPRINGS CO 80907

FEC ID number of contributing
federal political committee.

C

Name of Employer

GONSHOLT CHARITABLE TRUST

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 08 2016

Transaction ID : SA11AI.49591

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

85.47

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ELSIE GONSHOLT 809

Mailing Address 2330 WOOD AVE

City State Zip Code
COLORADO SPRINGS CO 80907

FEC ID number of contributing federal political committee.

C

Name of Employer
GONSHOLT CHARITABLE TRUST

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2016

Transaction ID : SA11AI.49592

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ISMAEL GONZALEZ 488

Mailing Address 10757 N CROSWELL RD

City State Zip Code
SAINT LOUIS MI 48880

FEC ID number of contributing federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.49593

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MARTIN GOODALE 604

Mailing Address 314 LOUISA ST N

City State Zip Code
SHOREWOOD IL 60404

FEC ID number of contributing federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.49601

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. BEVERLY GOODLETT 782

Mailing Address 2104 PENINSULA DR

City

SAN ANTONIO

State

TX

Zip Code

78239

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

725.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.49604

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR PAUL GOODMAN 110

Mailing Address 99 S SERVICE RD APT 402

City

NEW HYDE PARK

State

NY

Zip Code

11040

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.49605

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PAUL GOODMAN 110

Mailing Address 99 S SERVICE RD APT 402

City

NEW HYDE PARK

State

NY

Zip Code

11040

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

743.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.49606

Amount of Each Receipt this Period

293.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

403.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM M GREEN 018

Mailing Address 704 W LOWELL AVE

City

HAVERHILL

State

MA

Zip Code

01832

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.49672

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR GEORGE GRELE 633

Mailing Address 2918 TRAPPER TRL

City

WENTZVILLE

State

MO

Zip Code

63385

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.49702

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RICHARD S GRIFFITH 770

Mailing Address 3417 MILAM ST

City

HOUSTON

State

TX

Zip Code

77002

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

801.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.49725

Amount of Each Receipt this Period

101.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

301.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ELAYNE GROTH 344

Mailing Address 9989 N LANGDON RD

City State Zip Code
CITRUS SPRINGS FL 34434

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.49756

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ELAYNE GROTH 344

Mailing Address 9989 N LANGDON RD

City State Zip Code
CITRUS SPRINGS FL 34434

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.49757

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WILLIAM GROVER 060

Mailing Address 17 WINDY HILL LN

City State Zip Code
ROCKY HILL CT 06067

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.49758

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. OTIS D GRUBBS 934

Mailing Address 315 PINEY LN

City State Zip Code
 MORRO BAY CA 93442

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.49759

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. OTIS D GRUBBS 934

Mailing Address 315 PINEY LN

City State Zip Code
 MORRO BAY CA 93442

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.49760

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ALFRED B GUINN 763

Mailing Address 1111 7TH ST

City State Zip Code
 WICHITA FALLS TX 76301

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALSH & WATTS INC

Occupation

OIL&GAS PRODUCTIONS

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.49769

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ALFRED B GUINN 763

Mailing Address 1111 7TH ST

City

WICHITA FALLS

State

TX

Zip Code

76301

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALSH & WATTS INC

Occupation

OIL&GAS PRODUCTIONS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.49770

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ALFRED B GUINN 763

Mailing Address 1111 7TH ST

City

WICHITA FALLS

State

TX

Zip Code

76301

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALSH & WATTS INC

Occupation

OIL&GAS PRODUCTIONS

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.49771

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR VERN H GUMZ 544

Mailing Address 220 10TH ST S

City

WISCONSIN RAPIDS

State

WI

Zip Code

54494

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

TAX PREPARER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.49777

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

535.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HARRY L GUZELIMIAN 920

Mailing Address PO BOX 206

City

SOLANA BEACH

State

CA

Zip Code

92075

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

351.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	2		2	0	1	6		

Transaction ID : SA11AI.49790

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT HAASS 074

Mailing Address 302 HILLSIDE XING

City

POMPTON PLAINS

State

NJ

Zip Code

07444

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	0		2	0	1	6		

Transaction ID : SA11AI.49798

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS MARJORIE HAILEY 668

Mailing Address 720 S NEOSHO ST

City

COUNCIL GROVE

State

KS

Zip Code

66846

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	1		2	0	1	6		

Transaction ID : SA11AI.49823

Amount of Each Receipt this Period

50.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MARY HALEY 797

Mailing Address PO BOX 163

City State Zip Code
MENTONE TX 79754

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.49839

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CLARITA HALLING 662

Mailing Address 7300 W 107TH ST APT 415

City State Zip Code
OVERLAND PARK KS 66212

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.49857

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. VALETA HAMMAR 657

Mailing Address 1007 STERLING CT

City State Zip Code
NIXA MO 65714

FEC ID number of contributing
federal political committee.

C

Name of Employer

WOODEN HORSE B&B

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.49884

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KENNETH HANCOCK 301

Mailing Address 120 TREESIDE DR NW

City State Zip Code
 ROME GA 30165

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 02 / 2016

Transaction ID : SA11AI.49898

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS EDITH HANSEN 993

Mailing Address 2008 TURNER ST

City State Zip Code
 RICHLAND WA 99354

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11AI.49925

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS VIRGINIA HARDIN 240

Mailing Address 3044 STONEYBROOK DR

City State Zip Code
 ROANOKE VA 24018

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

885.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.49937

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

380.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR L G HARDWICKE 796 MD

Mailing Address 1325 WESTWOOD DR

City State Zip Code
 ABILENE TX 79603

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11AI.49943

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DR L G HARDWICKE 796 MD

Mailing Address 1325 WESTWOOD DR

City State Zip Code
 ABILENE TX 79603

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.49944

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DR L G HARDWICKE 796 MD

Mailing Address 1325 WESTWOOD DR

City State Zip Code
 ABILENE TX 79603

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

313.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.49945

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

123.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS K HARDY 054

Mailing Address 1590 KELLOGG BAY RD

City State Zip Code
 VERGENNES VT 05491

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ARTIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 25 / 2016

Transaction ID : SA11AI.49946

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JIMMY FRANK HARP 730

Mailing Address 3217 COTSWOLD SQ

City State Zip Code
 NORMAN OK 73072

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.49958

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JIMMY FRANK HARP 730

Mailing Address 3217 COTSWOLD SQ

City State Zip Code
 NORMAN OK 73072

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11AI.49959

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. BENJAMIN HARPSTER 483

Mailing Address 34861 BERKSHIRE CT

City State Zip Code
 FARMINGTON HILLS MI 48331

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 23 2016

Transaction ID : SA11AI.49968

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BENJAMIN HARPSTER 483

Mailing Address 34861 BERKSHIRE CT

City State Zip Code
 FARMINGTON HILLS MI 48331

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 24 2016

Transaction ID : SA11AI.49969

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BENJAMIN HARPSTER 483

Mailing Address 34861 BERKSHIRE CT

City State Zip Code
 FARMINGTON HILLS MI 48331

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 31 2016

Transaction ID : SA11AI.49970

Amount of Each Receipt this Period

70.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

240.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS JULIE HARRELL 770

Mailing Address 2921 CASON ST

City
HOUSTON

State Zip Code
TX 77005

FEC ID number of contributing
federal political committee.

C

Name of Employer

BORIN FAMILY FOUNDATION

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.49972

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOHN J HARRER 551

Mailing Address 1733 RACE ST

City
SAINT PAUL

State Zip Code
MN 55116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.49973

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN J HARRER 551

Mailing Address 1733 RACE ST

City
SAINT PAUL

State Zip Code
MN 55116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.49974

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MYRON G HARRISON 930

Mailing Address PO BOX 4144

City

VENTURA

State

CA

Zip Code

93007

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.50002

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RALPH E HARRISON 930

Mailing Address PO BOX 4997

City

VENTURA

State

CA

Zip Code

93007

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

595.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.50003

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RALPH E HARRISON 930

Mailing Address PO BOX 4997

City

VENTURA

State

CA

Zip Code

93007

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.50004

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

635.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ELIZABETH R HASKINS 244

Mailing Address 150 FOREST HILL VW

City State Zip Code
LEXINGTON VA 24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.50035

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ELIZABETH R HASKINS 244

Mailing Address 150 FOREST HILL VW

City State Zip Code
LEXINGTON VA 24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.50036

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ELIZABETH R HASKINS 244

Mailing Address 150 FOREST HILL VW

City State Zip Code
LEXINGTON VA 24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.50037

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ELIZABETH R HASKINS 244

Mailing Address 150 FOREST HILL VW

City

LEXINGTON

State

VA

Zip Code

24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2		2	0	1	6		

Transaction ID : SA11AI.50038

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ELIZABETH R HASKINS 244

Mailing Address 150 FOREST HILL VW

City

LEXINGTON

State

VA

Zip Code

24450

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	4		2	0	1	6		

Transaction ID : SA11AI.50039

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. J P HAWLEY 309

Mailing Address 116 SPRINGLAKES DR

City

MARTINEZ

State

GA

Zip Code

30907

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1		2	0	1	6		

Transaction ID : SA11AI.50066

Amount of Each Receipt this Period

120.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR DAVID HAYES 063 MD

Mailing Address 740 OCEAN AVE

City

NEW LONDON

State

CT

Zip Code

06320

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 23 / 2016

Transaction ID : SA11AI.50073

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MARILYN M HAYS 706

Mailing Address 910 BAYOU OAK LN

City

LAKE CHARLES

State

LA

Zip Code

70605

FEC ID number of contributing
federal political committee.

C

Name of Employer

IMPERIAL CONSTRUCTORS INC

Occupation

PARTNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 23 / 2016

Transaction ID : SA11AI.50080

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ADM THOMAS HAYWARD 981

Mailing Address 1223 SPRING ST APT 901

City

SEATTLE

State

WA

Zip Code

98104

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 12 / 2016

Transaction ID : SA11AI.50081

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. BOBBY HEIFNER 750

Mailing Address 1580 E WINNINGKOFF RD

City State Zip Code
 ALLEN TX 75002

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.50097

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BOBBY HEIFNER 750

Mailing Address 1580 E WINNINGKOFF RD

City State Zip Code
 ALLEN TX 75002

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.50098

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. BOBBY HEIFNER 750

Mailing Address 1580 E WINNINGKOFF RD

City State Zip Code
 ALLEN TX 75002

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.50099

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS FRANCISCA HENDERSON 852

Mailing Address 122 N 82ND ST

City	State	Zip Code
MESA	AZ	85207

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1446.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	2		2	0	1	6		

Transaction ID : SA11AI.50124

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EUGENE HENRY 953

Mailing Address 11303 STEINER DR

City	State	Zip Code
JAMESTOWN	CA	95327

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	8		2	0	1	6		

Transaction ID : SA11AI.50146

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EUGENE HENRY 953

Mailing Address 11303 STEINER DR

City	State	Zip Code
JAMESTOWN	CA	95327

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.50147

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

105.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JAMES HEPOLA 535

Mailing Address 882 HIGHLAND TRL

City State Zip Code
 PRAIRIE DU SAC WI 53578

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 18 2016

Transaction ID : SA11AI.50153

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS SARAH HERMAN 314

Mailing Address 10531 INDIGO RD

City State Zip Code
 SAVANNAH GA 31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 08 2016

Transaction ID : SA11AI.50159

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS SARAH HERMAN 314

Mailing Address 10531 INDIGO RD

City State Zip Code
 SAVANNAH GA 31406

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 25 2016

Transaction ID : SA11AI.50160

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN P HICKEY 341

Mailing Address 2612 GOLFSIDE CT

City

NAPLES

State

FL

Zip Code

34110

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.50195

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS KATHLEEN HILL 080

Mailing Address 6 WINTERBERRY LN

City

WILLINGBORO

State

NJ

Zip Code

08046

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOARD OF EDUCATION

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.50218

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPT TATNALL LEA HILLMAN 816

Mailing Address 504 W BLEEKER ST

City

ASPEN

State

CO

Zip Code

81611

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9500.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.50241

Amount of Each Receipt this Period

2000.00

☐ Memo Item

CONTRIBUTION IS UNDER REVIEW

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2070.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR GARY P HITE 301

Mailing Address 942 LULA PAYNE TRL

City State Zip Code
 BALL GROUND GA 30107

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.50258

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS LINDA HODGE 068

Mailing Address 21 PERKINS RD

City State Zip Code
 GREENWICH CT 06830

FEC ID number of contributing
federal political committee.

C

Name of Employer

TOWN OF COLCHESTER

Occupation

SELECTMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11AI.50266

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS LINDA HODGE 068

Mailing Address 21 PERKINS RD

City State Zip Code
 GREENWICH CT 06830

FEC ID number of contributing
federal political committee.

C

Name of Employer

TOWN OF COLCHESTER

Occupation

SELECTMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.50267

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

80.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. KATHLEEN HODGMAN 600

Mailing Address 418 W OAKWOOD DR

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

HEALTH CARE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.50271

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS LOIS HOFFMAN 461

Mailing Address 1645 E KELLER DR

City

MOORESVILLE

State

IN

Zip Code

46158

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.50284

Amount of Each Receipt this Period

38.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS LOIS HOFFMAN 461

Mailing Address 1645 E KELLER DR

City

MOORESVILLE

State

IN

Zip Code

46158

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

08 / 19 / 2016

Transaction ID : SA11AI.50285

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

173.00

SCHEDULE A (FEC Form 3X)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS LOIS HOFFMAN 461

Mailing Address 1645 E KELLER DR

City

MOORESVILLE

State

IN

Zip Code

46158

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

283.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	2		2	0	1	6		

Transaction ID : SA11AI.50286

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS LOIS HOFFMAN 461

Mailing Address 1645 E KELLER DR

City

MOORESVILLE

State

IN

Zip Code

46158

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

333.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1		2	0	1	6		

Transaction ID : SA11AI.50287

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RICHARD L HOFFMAN 467

Mailing Address 1300 N 550 E

City

COLUMBIA CITY

State

IN

Zip Code

46725

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOFFMAN & ASSOCIATES

Occupation

RELOCATION MGT

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	8		2	0	1	6		

Transaction ID : SA11AI.50288

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RICHARD L HOFFMAN 467

Mailing Address 1300 N 550 E

City State Zip Code
COLUMBIA CITY IN 46725

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOFFMAN & ASSOCIATES

Occupation

RELOCATION MGT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.50289

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LUMAN W HOLMAN 757

Mailing Address PO BOX 1528

City State Zip Code
JACKSONVILLE TX 75766

FEC ID number of contributing
federal political committee.

C

Name of Employer

DECLINED

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.50337

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACK HON 068

Mailing Address PO BOX 1063

City State Zip Code
REDDING CEN CT 06875

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 03 / 2016

Transaction ID : SA11AI.50356

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

185.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JACK HON 068

Mailing Address PO BOX 1063

City

REDDING CEN

State

CT

Zip Code

06875

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.50357

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JACK HON 068

Mailing Address PO BOX 1063

City

REDDING CEN

State

CT

Zip Code

06875

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.50358

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CHARLES A HOWARD 454

Mailing Address 2631 DUNHILL PL

City

DAYTON

State

OH

Zip Code

45420

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOWARD & RUSCILLI INC

Occupation

PRESIDENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.50426

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CHARLES A HOWARD 454

Mailing Address 2631 DUNHILL PL

City
DAYTON

State
OH

Zip Code
45420

FEC ID number of contributing
federal political committee.

C

Name of Employer

HOWARD & RUSCILLI INC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.50427

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS PATRICIA HUBBARD 815

Mailing Address 125 FRANKLIN AVE APT 414

City

GRAND JCT

State

CO

Zip Code

81505

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.50444

Amount of Each Receipt this Period

85.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. NANCY M HUGHART 605

Mailing Address 15515 DAN PATCH DR

City

PLAINFIELD

State

IL

Zip Code

60544

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.50459

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS BETTY JANE HUMES 669

Mailing Address 1200 WILLOW ST

City
CONCORDIA

State Zip Code
KS 66901

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.50483

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR BRENT HURD 370

Mailing Address 204 PALMER CIR

City
LEBANON

State Zip Code
TN 37090

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.50506

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DALE HUTSON 358

Mailing Address 1117 CHESTERFIELD RD SE

City
HUNTSVILLE

State Zip Code
AL 35803

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 09 / 2016

Transaction ID : SA11AI.50515

Amount of Each Receipt this Period

35.00

☐ Memo Item

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123.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DALE HUTSON 358

Mailing Address 1117 CHESTERFIELD RD SE

City State Zip Code
HUNTSVILLE AL 35803

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.50516

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR CHARLES F IFFLAND 317

Mailing Address 406 OAK HILL RD

City State Zip Code
THOMASVILLE GA 31757

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2016

Transaction ID : SA11AI.50523

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CHARLES F IFFLAND 317

Mailing Address 406 OAK HILL RD

City State Zip Code
THOMASVILLE GA 31757

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.50524

Amount of Each Receipt this Period

400.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

520.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS DOROTHY A ISOLA 112

Mailing Address 2925 W 5TH ST APT 17B

City

BROOKLYN

State

NY

Zip Code

11224

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

528.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	8			2	0	1	6		

Transaction ID : SA11AI.50555

Amount of Each Receipt this Period

158.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT JEGLUM 537

Mailing Address 137 E WILSON ST UNIT 1011

City

MADISON

State

WI

Zip Code

53703

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	6		

Transaction ID : SA11AI.50630

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES MICHAEL JEMIOLA 902

Mailing Address 2016 GRANT AVE UNIT B

City

REDONDO BEACH

State

CA

Zip Code

90278

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	3			2	0	1	6		

Transaction ID : SA11AI.50631

Amount of Each Receipt this Period

400.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

583.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD E JOCELYN 912

Mailing Address 139 N BELMONT ST APT O

City State Zip Code
 GLENDALE CA 91206

FEC ID number of contributing
federal political committee.

C

Name of Employer

EAST WEST RAIL SCENES

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 12 / 2016

Transaction ID : SA11AI.50648

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS DOROTHY JOHNSON 172

Mailing Address 1421 PHILADELPHIA AVE APT

City State Zip Code
 CHAMBERSBURG PA 17201

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.50654

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ANN JOHNSON 341

Mailing Address 6642 TRIDENT WAY

City State Zip Code
 NAPLES FL 34108

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11AI.50662

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

225.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MICHAEL W JOHNSON 342

Mailing Address 4521 FOREST WOOD TRL

City

SARASOTA

State

FL

Zip Code

34241

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.50664

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS LOU P JOHNSON 376

Mailing Address 495 WILDWOOD RD

City

KINGSPORT

State

TN

Zip Code

37663

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.50665

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS LOU P JOHNSON 376

Mailing Address 495 WILDWOOD RD

City

KINGSPORT

State

TN

Zip Code

37663

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.50666

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

350.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MELVIN W JOHNSON 940

Mailing Address 337 HAZEL AVE

City

SAN BRUNO

State

CA

Zip Code

94066

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.50708

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT F JONES 325

Mailing Address 650 BRIAN CIR

City

MARY ESTHER

State

FL

Zip Code

32569

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

478.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.50735

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT F JONES 325

Mailing Address 650 BRIAN CIR

City

MARY ESTHER

State

FL

Zip Code

32569

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

578.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.50736

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

250.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ANGIE JONES 655

Mailing Address 20670 COUNTY ROAD 1000

City

SAINT JAMES

State

MO

Zip Code

65559

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.50742

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ANGIE JONES 655

Mailing Address 20670 COUNTY ROAD 1000

City

SAINT JAMES

State

MO

Zip Code

65559

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.50743

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ANGIE JONES 655

Mailing Address 20670 COUNTY ROAD 1000

City

SAINT JAMES

State

MO

Zip Code

65559

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.50744

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS DOROTHY JORDAHL 600

Mailing Address 24830 W HIGHWOODS DR

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.50753

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS DOROTHY JORDAHL 600

Mailing Address 24830 W HIGHWOODS DR

City State Zip Code
LAKE VILLA IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.50754

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS DONNA JORDAN 986

Mailing Address 2377 W HILLS DR

City State Zip Code
LONGVIEW WA 98632

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.50760

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN A JOST 598

Mailing Address 1531 SLEEPING CHILD RD

City State Zip Code
HAMILTON MT 59840

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

423.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.50768

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOHN A JOST 598

Mailing Address 1531 SLEEPING CHILD RD

City State Zip Code
HAMILTON MT 59840

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.50769

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS FERENC KACSINTA 913

Mailing Address 7323 CARTWRIGHT AVE

City State Zip Code
SUN VALLEY CA 91352

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.50794

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

570.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS FERENC KACSINTA 913

Mailing Address 7323 CARTWRIGHT AVE

City State Zip Code
SUN VALLEY CA 91352

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

980.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.50795

Amount of Each Receipt this Period

380.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS FERENC KACSINTA 913

Mailing Address 7323 CARTWRIGHT AVE

City State Zip Code
SUN VALLEY CA 91352

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.50796

Amount of Each Receipt this Period

1300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS FERENC KACSINTA 913

Mailing Address 7323 CARTWRIGHT AVE

City State Zip Code
SUN VALLEY CA 91352

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2580.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.50797

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1980.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS SARA KAERCHER 551

Mailing Address 7804 HIGHPOINTE RD

City
SAINT PAUL

State Zip Code
MN 55125

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.50802

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARIE-LUISE KALSI 770

Mailing Address 13307 CAROUSEL CT

City
HOUSTON

State Zip Code
TX 77041

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.50820

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. GORDON KASTNER 381

Mailing Address 4463 NORTHWOOD HILLS DR

City
MEMPHIS

State Zip Code
TN 38128

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.50845

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MORRIS KAUFMANN 920

Mailing Address 4741 COLLINOS WAY

City

OCEANSIDE

State

CA

Zip Code

92056

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.50857

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MORRIS KAUFMANN 920

Mailing Address 4741 COLLINOS WAY

City

OCEANSIDE

State

CA

Zip Code

92056

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.50858

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MORRIS KAUFMANN 920

Mailing Address 4741 COLLINOS WAY

City

OCEANSIDE

State

CA

Zip Code

92056

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.50859

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. NANCY KEEFER 631

Mailing Address 10185 SPRINGWOOD DR

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	18	/	2016

Transaction ID : SA11AI.50872

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. NANCY KEEFER 631

Mailing Address 10185 SPRINGWOOD DR

City	State	Zip Code
SAINT LOUIS	MO	63124

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

635.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	18	/	2016

Transaction ID : SA11AI.50873

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT KELLNER 731

Mailing Address 4625 SE 41ST ST

City	State	Zip Code
OKLAHOMA CITY	OK	73115

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	15	/	2016

Transaction ID : SA11AI.50893

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

385.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS BEVERLY KENNEDY 241

Mailing Address 2847 TITLEIST DR

City
SALEM

State Zip Code
VA 24153

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 10 / 2016

Transaction ID : SA11AI.50917

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS BEVERLY KENNEDY 241

Mailing Address 2847 TITLEIST DR

City
SALEM

State Zip Code
VA 24153

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : SA11AI.50918

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS BEVERLY KENNEDY 241

Mailing Address 2847 TITLEIST DR

City
SALEM

State Zip Code
VA 24153

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.50919

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

20.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS BEVERLY KENNEDY 241

Mailing Address 2847 TITLEIST DR

City State Zip Code
SALEM VA 24153

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 24 2016

Transaction ID : SA11AI.50920

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS BEVERLY KENNEDY 241

Mailing Address 2847 TITLEIST DR

City State Zip Code
SALEM VA 24153

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 24 2016

Transaction ID : SA11AI.50921

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR HARRY KESTLER 184

Mailing Address 119 MARKET RD

City State Zip Code
GREELEY PA 18425

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 18 2016

Transaction ID : SA11AI.50952

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

85.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS R J KIEL 495

Mailing Address 1919 BOSTON ST SE APT A309

City State Zip Code
 GRAND RAPIDS MI 49506

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.50967

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DRYEL L KIMBALL 229

Mailing Address 2706 FERNLEAF RD

City State Zip Code
 CHARLOTTESVILLE VA 22911

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.50973

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DRYEL L KIMBALL 229

Mailing Address 2706 FERNLEAF RD

City State Zip Code
 CHARLOTTESVILLE VA 22911

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.50974

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS FAYE KING 391

Mailing Address 114 COACHMANS RD

City State Zip Code
 MADISON MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 08 2016

Transaction ID : SA11AI.50982

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARION KIRWIN 193

Mailing Address 19 PARK AVE

City State Zip Code
 E FALLOWFIELD PA 19320

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 25 2016

Transaction ID : SA11AI.51022

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT KITTREDGE 992

Mailing Address 622 N DARTMOUTH RD

City State Zip Code
 SPOKANE VALLEY WA 99206

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 15 2016

Transaction ID : SA11AI.51032

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

575.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROBERT KITTREDGE 992

Mailing Address 622 N DARTMOUTH RD

City State Zip Code
 SPOKANE VALLEY WA 99206

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

538.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.51033

Amount of Each Receipt this Period

113.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS AGNES M KLEIN 346

Mailing Address 2655 NEBRASKA AVE APT 618

City State Zip Code
 PALM HARBOR FL 34684

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11AI.51042

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CLEO KNEPP 522

Mailing Address 808 6TH ST

City State Zip Code
 KALONA IA 52247

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11AI.51061

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

238.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CLEO KNEPP 522

Mailing Address 808 6TH ST

City

KALONA

State

IA

Zip Code

52247

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.51062

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR CLEO KNEPP 522

Mailing Address 808 6TH ST

City

KALONA

State

IA

Zip Code

52247

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

268.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.51063

Amount of Each Receipt this Period

38.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CLEO KNEPP 522

Mailing Address 808 6TH ST

City

KALONA

State

IA

Zip Code

52247

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

313.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.51064

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

108.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR FRANCIS P KOCH 505

Mailing Address 124 MALLARD AVE

City

STORM LAKE

State

IA

Zip Code

50588

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.51093

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. HARRY A KOCH 681 JR

Mailing Address 1302 S 101ST ST APT 310

City

OMAHA

State

NE

Zip Code

68124

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.51095

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR LOUIS KOCSIS 066

Mailing Address 42 BLANCHARD RD

City

EASTON

State

CT

Zip Code

06612

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.51101

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

780.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR LOUIS KOCSIS 066

Mailing Address 42 BLANCHARD RD

City
EASTON

State Zip Code
CT 06612

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.51102

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS MARY G KOEHL 774

Mailing Address 1307 MANOR LAKE CT

City
RICHMOND

State Zip Code
TX 77406

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.51105

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS MARY G KOEHL 774

Mailing Address 1307 MANOR LAKE CT

City
RICHMOND

State Zip Code
TX 77406

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.51106

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HENRY Y KUHL 088

Mailing Address PO BOX 26

City

FLEMINGTON

State

NJ

Zip Code

08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

MANAGER

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.00

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.51189

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR HENRY Y KUHL 088

Mailing Address PO BOX 26

City

FLEMINGTON

State

NJ

Zip Code

08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

MANAGER

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

801.00

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.51190

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JANE OSLER KYLE 130

Mailing Address 215 SUMMERHAVEN DR S

City

EAST SYRACUSE

State

NY

Zip Code

13057

FEC ID number of contributing
federal political committee.

C

Name of Employer

JANE OSLER KYLE CHARITABLE TRUST

Occupation

TRUSTEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

725.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.51209

Amount of Each Receipt this Period

350.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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450.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. BARBARA LADD 062

Mailing Address 25 SAMUEL LN

City	State	Zip Code
MANSFIELD CTR	CT	06250

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	1	6

Transaction ID : SA11AI.51218

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JAMES E LAIN 926

Mailing Address PO BOX 1939

City	State	Zip Code
HUNTINGTON BEACH	CA	92647

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

Transaction ID : SA11AI.51231

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JEAN M LAMB 836

Mailing Address 2814 S ILLINOIS AVE

City	State	Zip Code
CALDWELL	ID	83605

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	6

Transaction ID : SA11AI.51236

Amount of Each Receipt this Period

75.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS PATRICIA M LANGENDORF 134

Mailing Address 1009 N MADISON ST

City State Zip Code
 ROME NY 13440

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NY OFFICE OF MENTAL HEALTH

Occupation
 PROGRAM MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 02 2016

Transaction ID : SA11AI.51270

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BARBARA LAUDY 193

Mailing Address 56 KENDAL DR

City State Zip Code
 KENNETT SQUARE PA 19348

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 24 2016

Transaction ID : SA11AI.51311

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT LEAHY 284

Mailing Address 622 JASMINE LN SW

City State Zip Code
 SUNSET BEACH NC 28468

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 23 2016

Transaction ID : SA11AI.51337

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS JANE M LEARY 341

Mailing Address 108 MOORINGS PARK DR
APT 306

City State Zip Code
NAPLES FL 34105

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 15 / 2016

Transaction ID : SA11AI.51344

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RAY LEASURE 457

Mailing Address 2505 WARREN CHAPEL RD

City State Zip Code
FLEMING OH 45729

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CPA

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.51346

Amount of Each Receipt this Period

68.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR THEODORE B LEE 891

Mailing Address 3271 S HIGHLAND DR

City State Zip Code
LAS VEGAS NV 89109

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.51370

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

618.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS MARILYN M LEEDOM 549

Mailing Address 1196 BLAKES WAY

City
MENASHA

State Zip Code
WI 54952

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.51375

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARY L LEMLEY 117

Mailing Address 26 DOGWOOD HOLLOW LN

City
MILLER PLACE

State Zip Code
NY 11764

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.51400

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS SIBIL LESTER 241

Mailing Address 1754 UNION VALLEY RD

City
RINER

State Zip Code
VA 24149

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.51421

Amount of Each Receipt this Period

120.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

270.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ONA LESTER 300

Mailing Address 1101 HUMPHRIES RD NW

City State Zip Code
CONYERS GA 30012

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.51422

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MELVIN LEVINE 100

Mailing Address 201 E 79TH ST APT 6D

City State Zip Code
NEW YORK NY 10075

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.51429

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MELVIN LEVINE 100

Mailing Address 201 E 79TH ST APT 6D

City State Zip Code
NEW YORK NY 10075

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.51430

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS HILMA A LEVIS 775

Mailing Address 6901 AVE E

City

SANTA FE

State

TX

Zip Code

77510

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

420.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.51432

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS HILMA A LEVIS 775

Mailing Address 6901 AVE E

City

SANTA FE

State

TX

Zip Code

77510

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

470.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.51433

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SELMA M LEVNO 592

Mailing Address 305 7TH AVE SW

City

SIDNEY

State

MT

Zip Code

59270

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.51436

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. SELMA M LEVNO 592

Mailing Address 305 7TH AVE SW

City

SIDNEY

State

MT

Zip Code

59270

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.51437

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SELMA M LEVNO 592

Mailing Address 305 7TH AVE SW

City

SIDNEY

State

MT

Zip Code

59270

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.51438

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SELMA M LEVNO 592

Mailing Address 305 7TH AVE SW

City

SIDNEY

State

MT

Zip Code

59270

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.51439

Amount of Each Receipt this Period

70.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

150.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. SELMA M LEVNO 592

Mailing Address 305 7TH AVE SW

City
SIDNEY

State Zip Code
MT 59270

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.51440

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROBERT LILLY 786

Mailing Address 104 ASTER CIR

City
GEORGETOWN

State Zip Code
TX 78633

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.51464

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR KEN W LINDEMANN 543

Mailing Address 3370 NAUTICAL AVE

City
GREEN BAY

State Zip Code
WI 54311

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.51471

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KEN W LINDEMANN 543

Mailing Address 3370 NAUTICAL AVE

City
GREEN BAY

State Zip Code
WI 54311

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

618.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.51472

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR KEN W LINDEMANN 543

Mailing Address 3370 NAUTICAL AVE

City
GREEN BAY

State Zip Code
WI 54311

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

653.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.51473

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR KEN W LINDEMANN 543

Mailing Address 3370 NAUTICAL AVE

City
GREEN BAY

State Zip Code
WI 54311

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

688.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.51474

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KEN W LINDEMANN 543

Mailing Address 3370 NAUTICAL AVE

City
GREEN BAY

State Zip Code
WI 54311

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

738.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.51475

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR GEORGE R LINDSAY 377

Mailing Address 11920 HORTON HWY

City
GREENEVILLE

State Zip Code
TN 37745

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.51478

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WESLEY LINDSTROM 561

Mailing Address 2743 171ST ST

City
CURRIE

State Zip Code
MN 56123

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.51480

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WESLEY LINDSTROM 561

Mailing Address 2743 171ST ST

City State Zip Code
CURRIE MN 56123

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.51481

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WESLEY LINDSTROM 561

Mailing Address 2743 171ST ST

City State Zip Code
CURRIE MN 56123

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.51482

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WESLEY LINDSTROM 561

Mailing Address 2743 171ST ST

City State Zip Code
CURRIE MN 56123

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.51483

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

190.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 154 OF 369

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROBERT LINGG 852

Mailing Address 249 LEISURE WORLD

City	State	Zip Code
MESA	AZ	85206

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	08	/	2016

Transaction ID : SA11AI.51487

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS BERNICE LINNEMANN 335

Mailing Address 2613 CR 721

City	State	Zip Code
WEBSTER	FL	33597

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	09	/	2016

Transaction ID : SA11AI.51490

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR HAROLD G LIPPERT 594

Mailing Address PO BOX 965
1012 20TH STREET

City	State	Zip Code
FORT BENTON	MT	59442

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	19	/	2016

Transaction ID : SA11AI.51495

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

385.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. GERALDINE LISKER 029

Mailing Address 30 ARGYLE AVE

City
RIVERSIDE

State Zip Code
RI 02915

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.51499

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DONALD L LJUNGREN 553

Mailing Address 945 CENTURY AVE SW #214

City
HUTCHINSON

State Zip Code
MN 55350

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.51516

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DONALD L LJUNGREN 553

Mailing Address 945 CENTURY AVE SW #214

City
HUTCHINSON

State Zip Code
MN 55350

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.51517

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LOUISE LOCKE 746

Mailing Address 16 WOODCREST

City

PONCA CITY

State

OK

Zip Code

74604

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.51530

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LOUISE LOCKE 746

Mailing Address 16 WOODCREST

City

PONCA CITY

State

OK

Zip Code

74604

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

368.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : SA11AI.51531

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT LOFTON 922

Mailing Address PO BOX 1828

City

CALIPATRIA

State

CA

Zip Code

92233

FEC ID number of contributing
federal political committee.

C

Name of Employer

SUPERIOR CATTLE FEEDERS LLC

Occupation

RANCHER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.51543

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROBERT LOFTON 922

Mailing Address PO BOX 1828

City State Zip Code
 CALIPATRIA CA 92233

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SUPERIOR CATTLE FEEDERS LLC

Occupation
 RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 15 / 2016

Transaction ID : SA11AI.51544

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT LOFTON 922

Mailing Address PO BOX 1828

City State Zip Code
 CALIPATRIA CA 92233

FEC ID number of contributing
federal political committee.

C

Name of Employer
 SUPERIOR CATTLE FEEDERS LLC

Occupation
 RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016

Transaction ID : SA11AI.51545

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS KATHRYNE LORD 341

Mailing Address 428 BARCELONA CT

City State Zip Code
 MARCO ISLAND FL 34145

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 24 / 2016

Transaction ID : SA11AI.51571

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR BERNARD LOUIS 535

Mailing Address 30551 COUNTY HWY B

City
LONE ROCKState Zip Code
WI 53556FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	01	/	2016

Transaction ID : SA11AI.51579

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DONALD G LUEDTKE 463

Mailing Address 3455 S 650 W

City
NORTH JUDSONState Zip Code
IN 46366FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	04	/	2016

Transaction ID : SA11AI.51603

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DONALD G LUEDTKE 463

Mailing Address 3455 S 650 W

City
NORTH JUDSONState Zip Code
IN 46366FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08	/	04	/	2016

Transaction ID : SA11AI.51604

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

60.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD G LUEDTKE 463

Mailing Address 3455 S 650 W

City

NORTH JUDSON

State

IN

Zip Code

46366

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.51605

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR EDWARD MAHONEY 442

Mailing Address 8445 FOXGLOVE AVE NW

City

CLINTON

State

OH

Zip Code

44216

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.51675

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DR HISH S MAJZOUN 648 MD

Mailing Address 5527 RIVERCREST VALLEY DR

City

JOPLIN

State

MO

Zip Code

64804

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHYSICIAN

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.51685

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

345.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR THOMAS A MANN 336

Mailing Address 5205 OAK CHARTER CT

City State Zip Code
 TEMPLE TERRACE FL 33617

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 23 2016

Transaction ID : SA11AI.51718

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR THOMAS A MANN 336

Mailing Address 5205 OAK CHARTER CT

City State Zip Code
 TEMPLE TERRACE FL 33617

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 29 2016

Transaction ID : SA11AI.51719

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR BRUCE MAPES 064

Mailing Address 4A COVERED BRIDGE RD

City State Zip Code
 NEWTOWN CT 06470

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 31 2016

Transaction ID : SA11AI.51727

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD W MAREK 502

Mailing Address 1025 13TH ST

City

W DES MOINES

State

IA

Zip Code

50265

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.51730

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS JOYCE V MARTIN 801

Mailing Address 1900 E GIRARD PL APT 703

City

ENGLEWOOD

State

CO

Zip Code

80113

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

800.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.51763

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ALLEN D MARTIN 952

Mailing Address 2809 APPLEWOOD DR

City

LODI

State

CA

Zip Code

95242

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.51764

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

675.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS YOLANDA T MARTINEZ 913

Mailing Address 8301 GLADBECK AVE

City State Zip Code
 NORTHRIDGE CA 91324

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.51773

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ANDREW MARVIN 175

Mailing Address 914 FAIRVIEW AVE

City State Zip Code
 EPHRATA PA 17522

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 15 2016

Transaction ID : SA11AI.51779

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ANDREW MARVIN 175

Mailing Address 914 FAIRVIEW AVE

City State Zip Code
 EPHRATA PA 17522

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.51780

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RICHARD MARX 125

Mailing Address PO BOX 440

City State Zip Code
WAPPINGERS FALLS NY 12590

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2016

Transaction ID : SA11AI.51782

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RICHARD MARX 125

Mailing Address PO BOX 440

City State Zip Code
WAPPINGERS FALLS NY 12590

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.51783

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RICHARD MARX 125

Mailing Address PO BOX 440

City State Zip Code
WAPPINGERS FALLS NY 12590

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2620.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.51784

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RICHARD MARX 125

Mailing Address PO BOX 440

City

WAPPINGERS FALLS

State

NY

Zip Code

12590

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INSURANCE AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2963.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.51785

Amount of Each Receipt this Period

343.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS JANET M MASSIO 104

Mailing Address 3311 POLO PL

City

BRONX

State

NY

Zip Code

10465

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.51802

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CHARLES MATTHEWS 600

Mailing Address 321 GRAND AVE

City

WAUKEGAN

State

IL

Zip Code

60085

FEC ID number of contributing
federal political committee.

C

Name of Employer

MATTHEWS EMPLOYMENT INC

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.51835

Amount of Each Receipt this Period

1000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1363.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. WILLIAM E MATTINSON 453

Mailing Address 26 E MOUND ST

City

S CHARLESTON

State

OH

Zip Code

45368

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.51836

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. WILLIAM E MATTINSON 453

Mailing Address 26 E MOUND ST

City

S CHARLESTON

State

OH

Zip Code

45368

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.51837

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS ILSE E MAUCH 981

Mailing Address 334 NE 57TH ST

City

SEATTLE

State

WA

Zip Code

98105

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.51839

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS FRANCES A MAULDING 923

Mailing Address PO BOX 1505

City State Zip Code
HELENDALE CA 92342

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.51849

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MERLE L MAYHUGH 809

Mailing Address 208 SUMAC DR

City State Zip Code
COLORADO SPRINGS CO 80911

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.51864

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JOHN MCAULIFFE 068

Mailing Address 24 HESSIAN DR

City State Zip Code
RIDGEFIELD CT 06877

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.51887

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LOREN C MCBRIDE 295

Mailing Address 420 2ND AVE N

City	State	Zip Code
SURFSIDE BEACH	SC	29575

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	15	/	2016

Transaction ID : SA11AI.51893

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOSEPH F MCCLENDON 257

Mailing Address 109 LAUREL XING

City	State	Zip Code
HUNTINGTON	WV	25705

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PHARMACIST

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	01	/	2016

Transaction ID : SA11AI.51925

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DAVID A MCCORMICK 370

Mailing Address 824 MOORES CT

City	State	Zip Code
BRENTWOOD	TN	37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	11	/	2016

Transaction ID : SA11AI.51940

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

600.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RICHARD G MCDANOLDS 037

Mailing Address PO BOX 275

City	State	Zip Code
NORTH HAVERHILL	NH	03774

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

DAIRY FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	04	/	2016

Transaction ID : SA11AI.51961

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RICHARD G MCDANOLDS 037

Mailing Address PO BOX 275

City	State	Zip Code
NORTH HAVERHILL	NH	03774

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

DAIRY FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	15	/	2016

Transaction ID : SA11AI.51962

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ELLSWORTH MCKEE 373

Mailing Address 8052 GIOVANNI LN

City	State	Zip Code
COLLEGEDALE	TN	37363

FEC ID number of contributing
federal political committee.

C

Name of Employer

MCKEE FOODS CORP

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08	/	02	/	2016

Transaction ID : SA11AI.52020

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

400.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
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---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS CARYL MCKINNEY 920

Mailing Address PO BOX 131538

City

CARLSBAD

State

CA

Zip Code

92013

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	5		2	0	1	6		

Transaction ID : SA11AI.52045

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DOUGLAS MCKISSACK 314

Mailing Address 7 BITTERROOT LN

City

SAVANNAH

State

GA

Zip Code

31419

FEC ID number of contributing
federal political committee.

C

Name of Employer

GULFSTREAM AEROSPACE CORP

Occupation

EXECUTIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	1		2	0	1	6		

Transaction ID : SA11AI.52046

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DOUGLAS MCKISSACK 314

Mailing Address 7 BITTERROOT LN

City

SAVANNAH

State

GA

Zip Code

31419

FEC ID number of contributing
federal political committee.

C

Name of Employer

GULFSTREAM AEROSPACE CORP

Occupation

EXECUTIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	1		2	0	1	6		

Transaction ID : SA11AI.52047

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

210.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM G MCLAUGHLIN 336

Mailing Address 1510 E PALM AVE APT A314

City State Zip Code
TAMPA FL 33605

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.52052

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WILLIAM G MCLAUGHLIN 336

Mailing Address 1510 E PALM AVE APT A314

City State Zip Code
TAMPA FL 33605

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.52053

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JAMES MCMILLAN 773

Mailing Address 15 CRYSTAL CANYON PL

City State Zip Code
SPRING TX 77389

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.52064

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

160.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS NITA MCNEAL 780

Mailing Address 221 DRY FORK RD

City
GEORGE WEST

State Zip Code
TX 78022

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.52067

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BURTON MCPHEETERS 691

Mailing Address 23998 S MCPHEETERS RD

City
GOTHENBURG

State Zip Code
NE 69138

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.52076

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS LOIS M MELLEN 532

Mailing Address 1219 N JACKSON ST UNIT 101

City
MILWAUKEE

State Zip Code
WI 53202

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.52118

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS LOIS M MELLEN 532

Mailing Address 1219 N JACKSON ST UNIT 101

City State Zip Code
 MILWAUKEE WI 53202

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 09 2016

Transaction ID : SA11AI.52119

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WALLACE MERDINYAN 063

Mailing Address 611 OCEAN AVE UNIT G4

City State Zip Code
 NEW LONDON CT 06320

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 12 2016

Transaction ID : SA11AI.52136

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WALLACE MERDINYAN 063

Mailing Address 611 OCEAN AVE UNIT G4

City State Zip Code
 NEW LONDON CT 06320

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 29 2016

Transaction ID : SA11AI.52137

Amount of Each Receipt this Period

5.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ALFRED J MEYER 737

Mailing Address 511 N 2ND ST

City

OKARCHE

State

OK

Zip Code

73762

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.52156

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ALFRED J MEYER 737

Mailing Address 511 N 2ND ST

City

OKARCHE

State

OK

Zip Code

73762

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52157

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WILLIAM S MICHAUX 232

Mailing Address 1600 WESTBROOK AVE APT 743

City

RICHMOND

State

VA

Zip Code

23227

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.52171

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS JOAN G MILAM 333

Mailing Address 2673 CENTER COURT DR

City
WESTON

State Zip Code
FL 33332

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1375.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.52181

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS JOAN G MILAM 333

Mailing Address 2673 CENTER COURT DR

City
WESTON

State Zip Code
FL 33332

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1425.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.52182

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JOAN G MILAM 333

Mailing Address 2673 CENTER COURT DR

City
WESTON

State Zip Code
FL 33332

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1470.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52183

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

345.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. G LYNDON MILEK 368

Mailing Address 20 LEE ROAD 545

City

SMITHS

State

AL

Zip Code

36877

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.52187

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. G LYNDON MILEK 368

Mailing Address 20 LEE ROAD 545

City

SMITHS

State

AL

Zip Code

36877

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52188

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS MARY ELLEN MILLER 282

Mailing Address 1735 MARYLAND AVE

City

CHARLOTTE

State

NC

Zip Code

28209

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.52205

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD J MILLER 630

Mailing Address 300 CLAYMONT DR

City
BALLWIN

State Zip Code
MO 63011

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.52226

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT E MILLER 729

Mailing Address 2917 CLIFF DR

City
FORT SMITH

State Zip Code
AR 72901

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.52227

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS EDNA E MILLER 756

Mailing Address 408 N LIVE OAK ST

City
GLADEWATER

State Zip Code
TX 75647

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.52230

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

220.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR BRUCE E MILLER 820

Mailing Address PO BOX 20008

City

CHEYENNE

State

WY

Zip Code

82003

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.52233

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR LANCE MILLS 961

Mailing Address PO BOX 303

City

CARNELIAN BAY

State

CA

Zip Code

96140

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.52250

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CECIL M MINICH 299

Mailing Address 44 QUIET COVE WAY

City

BEAUFORT

State

SC

Zip Code

29907

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

335.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.52261

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

650.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. VIRGINIA MINOR 285

Mailing Address 313 FUTRELL RD

City State Zip Code
RICHLANDS NC 28574

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.52262

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RONALD MITSCH 551

Mailing Address 4 CHARLEY LAKE CT

City State Zip Code
SAINT PAUL MN 55127

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVENTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.52278

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS PATRICIA MOLLINO 117

Mailing Address 515 N BAY AVE

City State Zip Code
MASSAPEQUA NY 11758

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52298

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

295.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. RUTH MONTGOMERY 752

Mailing Address 4242 LOMO ALTO DR APT N40

City State Zip Code
DALLAS TX 75219

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.52327

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. RUTH MONTGOMERY 752

Mailing Address 4242 LOMO ALTO DR APT N40

City State Zip Code
DALLAS TX 75219

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.52328

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT M MONTGOMERY 853

Mailing Address 12410 W CORONET DR

City State Zip Code
SUN CITY WEST AZ 85375

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.52330

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MARVIN MOORE 921

Mailing Address 4019 HICOCK ST

City

SAN DIEGO

State

CA

Zip Code

92110

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MECHANIC

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.52351

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MARVIN MOORE 921

Mailing Address 4019 HICOCK ST

City

SAN DIEGO

State

CA

Zip Code

92110

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MECHANIC

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

815.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.52352

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MARVIN MOORE 921

Mailing Address 4019 HICOCK ST

City

SAN DIEGO

State

CA

Zip Code

92110

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MECHANIC

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

865.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.52353

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MARVIN MOORE 921

Mailing Address 4019 HICOCK ST

City

SAN DIEGO

State

CA

Zip Code

92110

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MECHANIC

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

915.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52354

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MARVIN MOORE 921

Mailing Address 4019 HICOCK ST

City

SAN DIEGO

State

CA

Zip Code

92110

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

MECHANIC

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

990.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52355

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DR CRAIG MORGAN 257

Mailing Address 1611 13TH AVE

City

HUNTINGTON

State

WV

Zip Code

25701

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

647.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.52363

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

225.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR CRAIG MORGAN 257

Mailing Address 1611 13TH AVE

City
HUNTINGTON

State Zip Code
WV 25701

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1147.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 26 2016

Transaction ID : SA11AI.52364

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JAMES MORGAN 283

Mailing Address 813 OLEANDER CT

City
STEDMAN

State Zip Code
NC 28391

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 18 2016

Transaction ID : SA11AI.52366

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES MORGAN 283

Mailing Address 813 OLEANDER CT

City
STEDMAN

State Zip Code
NC 28391

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 26 2016

Transaction ID : SA11AI.52367

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES MORGAN 283

Mailing Address 813 OLEANDER CT

City

STEDMAN

State

NC

Zip Code

28391

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.52368

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RICHARD MORRIS 622 SR

Mailing Address 1438 1ST AVE

City

FAIRVIEW HEIGHTS

State

IL

Zip Code

62208

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

217.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.52384

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ROSE MARIE MORRIS 775

Mailing Address 4115 CLOVERNOOK LN

City

SEABROOK

State

TX

Zip Code

77586

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1031.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.52385

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

120.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ROSE MARIE MORRIS 775

Mailing Address 4115 CLOVERNOOK LN

City

SEABROOK

State

TX

Zip Code

77586

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1106.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.52386

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ROSE MARIE MORRIS 775

Mailing Address 4115 CLOVERNOOK LN

City

SEABROOK

State

TX

Zip Code

77586

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1306.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.52387

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ROSE MARIE MORRIS 775

Mailing Address 4115 CLOVERNOOK LN

City

SEABROOK

State

TX

Zip Code

77586

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1406.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52388

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

375.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM MORRISON 161

Mailing Address 137 E FAIRMONT AVE

City

NEW CASTLE

State

PA

Zip Code

16105

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

370.00

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.52392

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DEAN N MORRISON 972

Mailing Address 12250 SW 33RD AVE

City

PORTLAND

State

OR

Zip Code

97219

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVENTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52396

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS MARIE B MORSE 447

Mailing Address 3025 WOODCLIFF DR NW

City

CANTON

State

OH

Zip Code

44718

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.52398

Amount of Each Receipt this Period

225.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

410.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS MARIE B MORSE 447

Mailing Address 3025 WOODCLIFF DR NW

City State Zip Code
CANTON OH 44718

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.52399

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. BETTY S MOTT 802

Mailing Address 5206 E ATLANTIC PL

City State Zip Code
DENVER CO 80222

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.52420

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PETER W MOYER 894

Mailing Address 118 ABBEY PEAK LN

City State Zip Code
INCLINE VILLAGE NV 89451

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.52429

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR PETER W MOYER 894

Mailing Address 118 ABBEY PEAK LN

City State Zip Code
INCLINE VILLAGE NV 89451

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52430

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR FRANCIS MUMMA 174

Mailing Address 2560 N SHERMAN ST

City State Zip Code
YORK PA 17406

FEC ID number of contributing
federal political committee.

C

Name of Employer

TOPFLIGHT CORP

Occupation

MECHANICAL MAINTENANCE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.52451

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JAMES W MURPHY 460

Mailing Address 11800 PEBBLEPOINTE PASS

City State Zip Code
CARMEL IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.52461

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

275.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JAMES W MURPHY 460

Mailing Address 11800 PEBBLEPOINTE PASS

City State Zip Code
CARMEL IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.52462

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JAMES W MURPHY 460

Mailing Address 11800 PEBBLEPOINTE PASS

City State Zip Code
CARMEL IN 46033

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52463

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City State Zip Code
SAINT PAUL MN 55119

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

825.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.52464

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City
SAINT PAUL

State Zip Code
MN 55119

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.52465

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City
SAINT PAUL

State Zip Code
MN 55119

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

981.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.52466

Amount of Each Receipt this Period

106.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CLAIR J MURPHY 551

Mailing Address 1626 RUTH ST N

City
SAINT PAUL

State Zip Code
MN 55119

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1081.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.52467

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

256.95

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. COL JOHN E MURRAY 782

Mailing Address 10000 RHINELAND #218

City

SAN ANTONIO

State

TX

Zip Code

78239

FEC ID number of contributing
federal political committee.

C

Name of Employer

US MILITARY

Occupation

OFFICER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.52476

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR FREDERICK MUZI 020

Mailing Address 10 POWISSET ST

City

DOVER

State

MA

Zip Code

02030

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.52486

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS CHELI MYERS 752

Mailing Address 3530 PINEHURST CIR

City

DALLAS

State

TX

Zip Code

75234

FEC ID number of contributing
federal political committee.

C

Name of Employer

WRIGHTSON, JOHNSON, HADDON & WILLIA

Occupation

MANAGER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

399.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.52489

Amount of Each Receipt this Period

199.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

799.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS CHELI MYERS 752

Mailing Address 3530 PINEHURST CIR

City State Zip Code
DALLAS TX 75234

FEC ID number of contributing
federal political committee.

C

Name of Employer

WRIGHTSON, JOHNSON, HADDON & WILLIAMSON

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52490

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS CHELI MYERS 752

Mailing Address 3530 PINEHURST CIR

City State Zip Code
DALLAS TX 75234

FEC ID number of contributing
federal political committee.

C

Name of Employer

WRIGHTSON, JOHNSON, HADDON & WILLIAMSON

Occupation

MANAGER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

514.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52491

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. STEVE H MYHR 981

Mailing Address 4407 30TH AVE W # A

City State Zip Code
SEATTLE WA 98199

FEC ID number of contributing
federal political committee.

C

Name of Employer

BURLINGTON NORTHERN

Occupation

RAILROAD EMPLOYEE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52492

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CHARLES E NEBEL 498

Mailing Address PO BOX 664

City

MUNISING

State

MI

Zip Code

49862

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELDER LAW

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.52525

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR CHARLES E NEBEL 498

Mailing Address PO BOX 664

City

MUNISING

State

MI

Zip Code

49862

FEC ID number of contributing
federal political committee.

C

Name of Employer

ELDER LAW

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.52526

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RALPH NELSON 932

Mailing Address PO BOX 1287

City

LEBEC

State

CA

Zip Code

93243

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.52563

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

425.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RALPH NELSON 932

Mailing Address PO BOX 1287

City State Zip Code
LEBEC CA 93243

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

975.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.52564

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RALPH NELSON 932

Mailing Address PO BOX 1287

City State Zip Code
LEBEC CA 93243

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1075.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52565

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RALPH NELSON 932

Mailing Address PO BOX 1287

City State Zip Code
LEBEC CA 93243

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.52566

Amount of Each Receipt this Period

150.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KENNETH NEUBAUER 741

Mailing Address 7821 E 76TH ST APT 500

City State Zip Code
TULSA OK 74133

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.52574

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS SHRILEY B NEWELL 922

Mailing Address 10460 FRONTIER TRL

City State Zip Code
CHERRY VALLEY CA 92223

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.52587

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN NIKKEL 741

Mailing Address 6625 S JAMESTOWN PL

City State Zip Code
TULSA OK 74136

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.52624

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS ROYCE NORTHCOTT 952

Mailing Address 9590 TRENTON WAY

City
STOCKTON

State Zip Code
CA 95212

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.52668

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS THELMA NUSCHKE 172

Mailing Address 6932 AUGUSTA NATIONAL

City
FAYETTEVILLE

State Zip Code
PA 17222

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

HOMEMAKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.52682

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. THOMAS O'GRADY 325

Mailing Address 145 POQUITO ROAD

City
SHALIMAR

State Zip Code
FL 32579

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.52726

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. THOMAS O'GRADY 325

Mailing Address 145 POQUITO ROAD

City

SHALIMAR

State

FL

Zip Code

32579

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	1	6

Transaction ID : SA11AI.52727

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. THOMAS O'GRADY 325

Mailing Address 145 POQUITO ROAD

City

SHALIMAR

State

FL

Zip Code

32579

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	6

Transaction ID : SA11AI.52728

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS CONNIE C O'NEIL 681

Mailing Address 3214 N 159TH AVE

City

OMAHA

State

NE

Zip Code

68116

FEC ID number of contributing
federal political committee.

C

Name of Employer

EASTER SEAL SOCIETY OF NEBRASKA

Occupation

DIRECTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

778.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	6

Transaction ID : SA11AI.52766

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

160.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN OGREN 920

Mailing Address 1021 COSTA PACIFICA WAY UNIT 2214

City State Zip Code
 OCEANSIDE CA 92054

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.52729

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARGUERITE C OLEYAR 925

Mailing Address 41780 BUTTERFIELD STAGE RD

City State Zip Code
 TEMECULA CA 92592

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1690.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.52737

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MISS ROSIE OMLIN 953

Mailing Address 2743 BAKER RD

City State Zip Code
 MODESTO CA 95358

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DAIRY FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.52762

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1400.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS ROSIE OMLIN 953

Mailing Address 2743 BAKER RD

City State Zip Code
 MODESTO CA 95358

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DAIRY FARMER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

751.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.52763

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR BENJAMIN T OYARZO 945

Mailing Address 58 MAGNOLIA DR

City State Zip Code
 CALISTOGA CA 94515

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.52821

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR BENJAMIN T OYARZO 945

Mailing Address 58 MAGNOLIA DR

City State Zip Code
 CALISTOGA CA 94515

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

443.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.52822

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR BENJAMIN T OYARZO 945

Mailing Address 58 MAGNOLIA DR

City

CALISTOGA

State

CA

Zip Code

94515

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

478.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.52823

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS EDITH P PALMER 109

Mailing Address 282 LAROE RD

City

CHESTER

State

NY

Zip Code

10918

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.52851

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR FOXHALL PARKER 105

Mailing Address 205 HONEY HOLLOW RD

City

POUND RIDGE

State

NY

Zip Code

10576

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

08 / 03 / 2016

Transaction ID : SA11AI.52868

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM B PARSONS 275

Mailing Address 222 CEDAR CLUB CIR

City State Zip Code
 CHAPEL HILL NC 27517

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

248.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 29 2016

Transaction ID : SA11AI.52890

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS MARY E PARTAIN 391

Mailing Address 1080 OLD HIGHWAY 51 RD

City State Zip Code
 PICKENS MS 39146

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 25 2016

Transaction ID : SA11AI.52893

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS RUTH PARTRIDGE 054

Mailing Address 3201 WAKE ROBIN DR

City State Zip Code
 SHELBURNE VT 05482

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 29 2016

Transaction ID : SA11AI.52896

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

303.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS RUTH PARTRIDGE 054

Mailing Address 3201 WAKE ROBIN DR

City

SHELBURNE

State

VT

Zip Code

05482

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.52897

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS JANE PASTELAK 194

Mailing Address 1192 LAURELWOOD RD

City

POTTSTOWN

State

PA

Zip Code

19465

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.52916

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JANE PASTELAK 194

Mailing Address 1192 LAURELWOOD RD

City

POTTSTOWN

State

PA

Zip Code

19465

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.52917

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

160.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DAN PATERNOSTER 488

Mailing Address 4770 CEMETERY RD

City

FOWLERVILLE

State

MI

Zip Code

48836

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.52925

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR BRIAN PATTERSON 495

Mailing Address 2084 TIMBERVIEW ST NE

City

GRAND RAPIDS

State

MI

Zip Code

49525

FEC ID number of contributing
federal political committee.

C

Name of Employer

PATTERSON HEATING & AIR

Occupation

CONTRACTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.52927

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PAUL PEELER 784 CPA

Mailing Address 11649 LEOPARD ST STE 3

City

CRP CHRISTI

State

TX

Zip Code

78410

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ACCOUNTANT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.52978

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR PAUL PEELER 784 CPA

Mailing Address 11649 LEOPARD ST STE 3

City State Zip Code
 CRP CHRISTI TX 78410

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ACCOUNTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 / 25 / 2016

Transaction ID : SA11AI.52979

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS HANNY PERBETSKY 957

Mailing Address 2720 TAHOE VISTA CT

City State Zip Code
 ROCKLIN CA 95765

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 / 29 / 2016

Transaction ID : SA11AI.52999

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS CATHERINE G PERCY 934

Mailing Address 757 HILLSIDE DR

City State Zip Code
 SOLVANG CA 93463

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 / 23 / 2016

Transaction ID : SA11AI.53000

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

435.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS CATHERINE G PERCY 934

Mailing Address 757 HILLSIDE DR

City

SOLVANG

State

CA

Zip Code

93463

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

425.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53001

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JAMES C PETTERSEN 537

Mailing Address 6225 MINERAL POINT RD APT C66

City

MADISON

State

WI

Zip Code

53705

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.53057

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LINDA PIERCE-HEANEY 850

Mailing Address 48412 N BLACK CYN HWY PMB 373

City

NEW RIVER

State

AZ

Zip Code

85087

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.53094

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR FREDERICK W PIRK 799

Mailing Address 7211 N MESA ST STE 1W

City
EL PASO

State Zip Code
TX 79912

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53118

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RICHARD PLACEK 010

Mailing Address 110 WHITAKER RD

City
WESTFIELD

State Zip Code
MA 01085

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 04 / 2016

Transaction ID : SA11AI.53130

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS LAURA PLAYFORD 298

Mailing Address 114 GRANVIEW RD

City
JACKSON

State Zip Code
SC 29831

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.53142

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

475.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 206 OF 369
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS PHYLLIS POHL 105

Mailing Address 720 MILTON ROAD APT NORTH F1

City	State	Zip Code
RYE	NY	10580

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	9		2	0	1	6		

Transaction ID : SA11AI.53157

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DAVID POPP 677

Mailing Address 2025 SHERIDAN AVE APT 16

City	State	Zip Code
HOXIE	KS	67740

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.53179

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DAVID POPP 677

Mailing Address 2025 SHERIDAN AVE APT 16

City	State	Zip Code
HOXIE	KS	67740

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	4		2	0	1	6		

Transaction ID : SA11AI.53180

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS ALMA POWELL 951

Mailing Address 30 E JULIAN ST UNIT 301

City State Zip Code
 SAN JOSE CA 95112

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11AI.53203

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EDWARD H POWLEY 622

Mailing Address 2010 STATE ST

City State Zip Code
 CHESTER IL 62233

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 16 / 2016

Transaction ID : SA11AI.53209

Amount of Each Receipt this Period

86.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. EDWARD H POWLEY 622

Mailing Address 2010 STATE ST

City State Zip Code
 CHESTER IL 62233

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 29 / 2016

Transaction ID : SA11AI.53210

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. EDWARD H POWLEY 622

Mailing Address 2010 STATE ST

City
CHESTER

State Zip Code
IL 62233

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.53211

Amount of Each Receipt this Period

86.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOHN T PRATT 349

Mailing Address 1479 SW SHORELINE DR

City
PALM CITY

State Zip Code
FL 34990

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.53215

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS JEANIE PRETZ 287

Mailing Address 7 SKYVIEW DR

City
LAKE TOXAWAY

State Zip Code
NC 28747

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.53221

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1666.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN PRICE 988

Mailing Address 715 QUINCE ST UNIT 2212

City State Zip Code
OMAK WA 98841

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRICE MOTORS INC

Occupation
PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.53239

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WOLFGANG G PRIEBE 985

Mailing Address 813 COOPER POINT LOOP SW #A

City State Zip Code
OLYMPIA WA 98506

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.53242

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WOLFGANG G PRIEBE 985

Mailing Address 813 COOPER POINT LOOP SW #A

City State Zip Code
OLYMPIA WA 98506

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.53243

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WOLFGANG G PRIEBE 985

Mailing Address 813 COOPER POINT LOOP SW #A

City State Zip Code
 OLYMPIA WA 98506

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.53244

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WOLFGANG G PRIEBE 985

Mailing Address 813 COOPER POINT LOOP SW #A

City State Zip Code
 OLYMPIA WA 98506

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53245

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS ELSA D PRINCE 494

Mailing Address 1057 S SHORE DR

City State Zip Code
 HOLLAND MI 49423

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

EDP MGMT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.53247

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

530.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS RUTH E PRINGLE 750

Mailing Address 916 LAKE HIGHLANDS DR

City	State	Zip Code
ALLEN	TX	75002

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.53253

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ANNA PULLIN 244

Mailing Address 806 CRAIG DR

City	State	Zip Code
STAUNTON	VA	24401

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	5		2	0	1	6		

Transaction ID : SA11AI.53271

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CONRAD S PUTZON 334

Mailing Address 316 MONCEAUX RD

City	State	Zip Code
WEST PALM BEACH	FL	33405

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.53281

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

143.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City State Zip Code
 SAN FRANCISCO CA 94121

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 09 / 2016

Transaction ID : SA11AI.53319

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS CLAIRE RAINS 941

Mailing Address 420 41ST AVE

City State Zip Code
 SAN FRANCISCO CA 94121

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11AI.53320

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS FERN S RANDALL 349

Mailing Address 1330 SW SHORELINE DR

City State Zip Code
 PALM CITY FL 34990

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.53330

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

155.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. EUNICE RATH 610

Mailing Address 1720 E LAWN DR

City

SAVANNA

State

IL

Zip Code

61074

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

545.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

Transaction ID : SA11AI.53343

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EUNICE RATH 610

Mailing Address 1720 E LAWN DR

City

SAVANNA

State

IL

Zip Code

61074

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	6

Transaction ID : SA11AI.53344

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS SHIRLEY A REED 926

Mailing Address 5431 EL DORADO DR

City

HUNTINGTON BEACH

State

CA

Zip Code

92649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	6

Transaction ID : SA11AI.53379

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

685.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR NORMAN E REES 945

Mailing Address 2406 HIGH POINTE CT

City

FAIRFIELD

State

CA

Zip Code

94534

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	1	6

Transaction ID : SA11AI.53383

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. EDWARD REICHELDERFER 178

Mailing Address 197 CATSKILL LN

City

NEW COLUMBIA

State

PA

Zip Code

17856

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	6

Transaction ID : SA11AI.53399

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CECIL REID 280

Mailing Address 160 BODIE AVE

City

FOREST CITY

State

NC

Zip Code

28043

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	1	6

Transaction ID : SA11AI.53406

Amount of Each Receipt this Period

250.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

375.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CECIL REID 280

Mailing Address 160 BODIE AVE

City State Zip Code
FOREST CITY NC 28043

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.53407

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR PHILLIP REIGENBORN 443

Mailing Address 1957 WAYCROSS AVE

City State Zip Code
AKRON OH 44320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.53411

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PHILLIP REIGENBORN 443

Mailing Address 1957 WAYCROSS AVE

City State Zip Code
AKRON OH 44320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53412

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD G REINHARD 180

Mailing Address 75 HARVARD AVE

City

PALMERTON

State

PA

Zip Code

18071

FEC ID number of contributing
federal political committee.

C

Name of Employer

PENCOV SERVICE IND.

Occupation

ADMINISTRATOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.53424

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS ANNE P REINHART 212

Mailing Address 6110 EDMONDSON AVE APT A2

City

CATONSVILLE

State

MD

Zip Code

21228

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 11 / 2016

Transaction ID : SA11AI.53428

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PETER RHEIN 900 CPA

Mailing Address 1407 HOLMBY AVE

City

LOS ANGELES

State

CA

Zip Code

90024

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

CPA

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.53454

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

810.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HAROLD RICHARD 958

Mailing Address PO BOX 246403

City

SACRAMENTO

State

CA

Zip Code

95824

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.53467

Amount of Each Receipt this Period

80.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WILLIAM I RICHTER 542

Mailing Address 1004 W CRESCENT DR

City

MANITOWOC

State

WI

Zip Code

54220

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.53476

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WILLIAM I RICHTER 542

Mailing Address 1004 W CRESCENT DR

City

MANITOWOC

State

WI

Zip Code

54220

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.53477

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM I RICHTER 542

Mailing Address 1004 W CRESCENT DR

City

MANITOWOC

State

WI

Zip Code

54220

FEC ID number of contributing
federal political committee.

C

Name of Employer

FRS

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.53478

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RONALD RIDGWAY 633

Mailing Address 414 CHARLEMAGNE DR

City

LAKE SAINT LOUIS

State

MO

Zip Code

63367

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53495

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MELVIN A RIES 954

Mailing Address 3585 ROUND BARN BLVD
APT 329

City

SANTA ROSA

State

CA

Zip Code

95403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

566.02

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.53503

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MELVIN A RIES 954

Mailing Address 3585 ROUND BARN BLVD
APT 329

City State Zip Code
SANTA ROSA CA 95403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

601.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.53504

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MELVIN A RIES 954

Mailing Address 3585 ROUND BARN BLVD
APT 329

City State Zip Code
SANTA ROSA CA 95403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

651.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2016

Transaction ID : SA11AI.53505

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MELVIN A RIES 954

Mailing Address 3585 ROUND BARN BLVD
APT 329

City State Zip Code
SANTA ROSA CA 95403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.53506

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MELVIN A RIES 954

Mailing Address 3585 ROUND BARN BLVD
APT 329

City State Zip Code
SANTA ROSA CA 95403

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

736.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 22 2016

Transaction ID : SA11AI.53507

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHARLES RIGGS 410

Mailing Address 15 THOMAS POINTE DR

City State Zip Code
FORT THOMAS KY 41075

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 23 2016

Transaction ID : SA11AI.53515

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR LAWRENCE RIPA K 117 JR

Mailing Address 5 TAMMI CT

City State Zip Code
KINGS PARK NY 11754

FEC ID number of contributing
federal political committee.

C

Name of Employer

LAWRENCE RIPA K CO INC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 29 2016

Transaction ID : SA11AI.53528

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DAVID RISMILLER 341

Mailing Address 4021 GULF SHORE BLVD N APT 1006 AP

City State Zip Code
 NAPLES FL 34103

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.53532

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DAVID RISMILLER 341

Mailing Address 4021 GULF SHORE BLVD N APT 1006 AP

City State Zip Code
 NAPLES FL 34103

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.53533

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PHILIP E RITCH 967

Mailing Address 146 KALUAMOO ST

City State Zip Code
 KAILUA HI 96734

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.53535

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS DOROTHY ROBERT 931

Mailing Address 1970 LEMON RANCH RD

City State Zip Code
SANTA BARBARA CA 93108

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 29 2016

Transaction ID : SA11AI.53557

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DAVID ROBINSON 662

Mailing Address 9970 RILEY ST

City State Zip Code
OVERLAND PARK KS 66212

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 12 2016

Transaction ID : SA11AI.53581

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS PEARL B ROENNAU 904

Mailing Address 813 9TH ST APT 1

City State Zip Code
SANTA MONICA CA 90403

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 19 2016

Transaction ID : SA11AI.53592

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

330.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. WELDON ROGERS 339

Mailing Address PO BOX 442

City	State	Zip Code
BOCA GRANDE	FL	33921

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

376.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	6		2	0	1	6		

Transaction ID : SA11AI.53598

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ARTHUR ROHRER 626

Mailing Address 175 LINCOLNWOOD DR

City	State	Zip Code
LINCOLN	IL	62656

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.53622

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MARVIN ROLEY 553

Mailing Address 19175 TWIN LAKES RD NW

City	State	Zip Code
ELK RIVER	MN	55330

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	1		2	0	1	6		

Transaction ID : SA11AI.53628

Amount of Each Receipt this Period

35.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

235.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 OF 369

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MARVIN ROLEY 553

Mailing Address 19175 TWIN LAKES RD NW

City	State	Zip Code
ELK RIVER	MN	55330

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.53629

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. KENNETH L ROLFE 973

Mailing Address 301 SE FOUNDATION DR

City	State	Zip Code
DALLAS	OR	97338

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	2		2	0	1	6		

Transaction ID : SA11AI.53630

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS MARILYN ROSE 344

Mailing Address 8842 SW 91ST ST UNIT A

City	State	Zip Code
OCALA	FL	34481

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		2	3		2	0	1	6		

Transaction ID : SA11AI.53661

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

120.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 225 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MARILYN ROSE 344

Mailing Address 8842 SW 91ST ST UNIT A

City State Zip Code
OCALA FL 34481

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 29 2016

Transaction ID : SA11AI.53662

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR GORDON ROSENGREN 554

Mailing Address 6800 PILLSBURY AVE S

City State Zip Code
MINNEAPOLIS MN 55423

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 16 2016

Transaction ID : SA11AI.53668

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR GORDON ROSENGREN 554

Mailing Address 6800 PILLSBURY AVE S

City State Zip Code
MINNEAPOLIS MN 55423

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 31 2016

Transaction ID : SA11AI.53669

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

70.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS MARY RUEGGER 922

Mailing Address 398 RUTHERFORD ROAD

City State Zip Code
BRAWLEY CA 92227

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 01 2016

Transaction ID : SA11AI.53722

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS MARY RUEGGER 922

Mailing Address 398 RUTHERFORD ROAD

City State Zip Code
BRAWLEY CA 92227

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y Y
08 15 2016

Transaction ID : SA11AI.53723

Amount of Each Receipt this Period

205.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DARRELL L RUNNELS 853

Mailing Address 11001 W CONNECTICUT AVE

City State Zip Code
SUN CITY AZ 85351

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y Y
08 16 2016

Transaction ID : SA11AI.53732

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

430.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 227 OF 369

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR FRANKLIN T RUSSELL 145

Mailing Address 5624 PARDY SMITH RD

City
NEWARK

State Zip Code
NY 14513

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.53735

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JEROME D RYAN 890

Mailing Address 806 BUCHANAN BLVD STE 115

City
BOULDER CITY

State Zip Code
NV 89005

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.53755

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS HELEN SAINO 325

Mailing Address 5214 CHOCTAW AVE

City
PENSACOLA

State Zip Code
FL 32507

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.53758

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JOHN W SAMPSON 339

Mailing Address 9614 PARKWOOD CT

City State Zip Code
FORT MYERS FL 33908

FEC ID number of contributing federal political committee.

C

Name of Employer

6S RANCH

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 04 2016

Transaction ID : SA11AI.53783

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOHN W SAMPSON 339

Mailing Address 9614 PARKWOOD CT

City State Zip Code
FORT MYERS FL 33908

FEC ID number of contributing federal political committee.

C

Name of Employer

6S RANCH

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 04 2016

Transaction ID : SA11AI.53784

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN W SAMPSON 339

Mailing Address 9614 PARKWOOD CT

City State Zip Code
FORT MYERS FL 33908

FEC ID number of contributing federal political committee.

C

Name of Employer

6S RANCH

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

920.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 15 2016

Transaction ID : SA11AI.53785

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. IRENE SANDOZ 687

Mailing Address 500 JAMES ST APT 408

City State Zip Code
VERDIGRE NE 68783

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.53803

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. IRENE SANDOZ 687

Mailing Address 500 JAMES ST APT 408

City State Zip Code
VERDIGRE NE 68783

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 16 / 2016

Transaction ID : SA11AI.53804

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. IRENE SANDOZ 687

Mailing Address 500 JAMES ST APT 408

City State Zip Code
VERDIGRE NE 68783

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.53805

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MARLENE J SANTAKO 066

Mailing Address 58 DANIELS FARM RD

City

TRUMBULL

State

CT

Zip Code

06611

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

256.10

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53813

Amount of Each Receipt this Period

156.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS NILDA SANTOS 331

Mailing Address 1555 OBISPO AVE

City

CORAL GABLES

State

FL

Zip Code

33134

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

285.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.53818

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES R SARGENT 685

Mailing Address 5700 FREMONT ST

City

LINCOLN

State

NE

Zip Code

68507

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.53819

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

226.10

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS MARGARET SCHANTZ 591

Mailing Address 4627 STONE ST

City

BILLINGS

State

MT

Zip Code

59101

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.53854

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JOANN SCHARF 686

Mailing Address 1504 G ST

City

SCHUYLER

State

NE

Zip Code

68661

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCHARF CONSTRUCTION CO

Occupation

PARTNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.53857

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PAUL SCHEE 553

Mailing Address 431 PRAIRIE CENTER DR APT 301

City

EDEN PRAIRIE

State

MN

Zip Code

55344

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.53858

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

125.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR PAUL SCHEE 553

Mailing Address 431 PRAIRIE CENTER DR APT 301

City	State	Zip Code
EDEN PRAIRIE	MN	55344

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		16		2016

Transaction ID : SA11AI.53859

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR PAUL SCHEE 553

Mailing Address 431 PRAIRIE CENTER DR APT 301

City	State	Zip Code
EDEN PRAIRIE	MN	55344

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		16		2016

Transaction ID : SA11AI.53860

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PAUL SCHEE 553

Mailing Address 431 PRAIRIE CENTER DR APT 301

City	State	Zip Code
EDEN PRAIRIE	MN	55344

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y = Y
08		29		2016

Transaction ID : SA11AI.53861

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

235.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR PAUL J SCHILLING 320

Mailing Address 505 PORPOISE POINT DR

City

ST AUGUSTINE

State

FL

Zip Code

32084

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 11 / 2016

Transaction ID : SA11AI.53876

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DR PAUL J SCHILLING 320

Mailing Address 505 PORPOISE POINT DR

City

ST AUGUSTINE

State

FL

Zip Code

32084

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53877

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR PAUL SCHNEIDER 590

Mailing Address 17 PALISADE BASIN DR

City

RED LODGE

State

MT

Zip Code

59068

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.53897

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CHARLES SCHROEDER 920

Mailing Address 1973 BATCHELDER CT

City

EL CAJON

State

CA

Zip Code

92020

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53919

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MARVIN SCHUCK 561

Mailing Address 610 W SHORE DR

City

WORTHINGTON

State

MN

Zip Code

56187

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.53923

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR WALDO SCHULZ 550

Mailing Address 13039 EVERGREEN DR

City

LINDSTROM

State

MN

Zip Code

55045

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

410.00

Date of Receipt

08 / 19 / 2016

Transaction ID : SA11AI.53930

Amount of Each Receipt this Period

53.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

193.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS EVA F SCOTT 230

Mailing Address 15830 GADDES RD

City

AMELIA COURT HOUSE

State

VA

Zip Code

23002

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENTREPRENEUR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.53962

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS EVA F SCOTT 230

Mailing Address 15830 GADDES RD

City

AMELIA COURT HOUSE

State

VA

Zip Code

23002

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENTREPRENEUR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.53963

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS EVA F SCOTT 230

Mailing Address 15830 GADDES RD

City

AMELIA COURT HOUSE

State

VA

Zip Code

23002

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENTREPRENEUR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.53964

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

140.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR GEORGE C SCOTT 337

Mailing Address 6558 GOLDEN HORSESHOE DR

City State Zip Code
LARGO FL 33777

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.53969

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS LAURA SCOTT 373

Mailing Address 184 SCOTT LN

City State Zip Code
DECATUR TN 37322

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.53974

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. RICHARD SERAPHIN 077

Mailing Address 32 FARM LN

City State Zip Code
EATONTOWN NJ 07724

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.54031

Amount of Each Receipt this Period

40.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

330.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR HENRY SHAFER 986

Mailing Address 8900 NE 36TH ST APT 3

City

VANCOUVER

State

WA

Zip Code

98662

FEC ID number of contributing
federal political committee.

C

Name of Employer

CORNERSTONE LEASING LLC

Occupation

LEASING AGENT

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.54047

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR AL SHANE 917

Mailing Address 2175 FOOTHILL BLVD STE B

City

LA VERNE

State

CA

Zip Code

91750

FEC ID number of contributing
federal political committee.

C

Name of Employer

FINANCIAL LEARNING CENTER

Occupation

FINANCIAL ADVISOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.54051

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR SAMUEL S SHAPIRO 342

Mailing Address 535 SANCTUARY DR APT C707

City

LONGBOAT KEY

State

FL

Zip Code

34228

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.54057

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

400.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RICHARD E SHARROCK 440

Mailing Address 226 KANSAS AVE

City State Zip Code
 ELYRIA OH 44035

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 22 2016

Transaction ID : SA11AI.54064

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR RICHARD E SHARROCK 440

Mailing Address 226 KANSAS AVE

City State Zip Code
 ELYRIA OH 44035

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 30 2016

Transaction ID : SA11AI.54065

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RICHARD E SHARROCK 440

Mailing Address 226 KANSAS AVE

City State Zip Code
 ELYRIA OH 44035

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 30 2016

Transaction ID : SA11AI.54066

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

105.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS FRANCES LAGATTA SHELTON 100

Mailing Address 181 E 65TH ST APT 27A

City State Zip Code
 NEW YORK NY 10065

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

OIL & ENERGY PROFESSIONAL

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 29 2016

Transaction ID : SA11AI.54095

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JAMES SHERMAN 333

Mailing Address 4 TAHOE LN

City State Zip Code
 SEA RANCH LAKES FL 33308

FEC ID number of contributing federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 08 2016

Transaction ID : SA11AI.54110

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ARDYS I SHERVHEIM 501

Mailing Address 5350 NW 78TH CT

City State Zip Code
 JOHNSTON IA 50131

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.54115

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR BILLY E SHOMAKER 286

Mailing Address 186 FROSTY LN

City State Zip Code
 BEECH MOUNTAIN NC 28604

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 30 / 2016

Transaction ID : SA11AI.54128

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS EVELYN SILL 959

Mailing Address 1436 GRACEPHIL LN

City State Zip Code
 PARADISE CA 95969

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.54166

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS EVELYN SILL 959

Mailing Address 1436 GRACEPHIL LN

City State Zip Code
 PARADISE CA 95969

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 23 / 2016

Transaction ID : SA11AI.54167

Amount of Each Receipt this Period

20.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

305.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JOHN SILLIMAN 070

Mailing Address 16 JARDINE LN

City

LINCOLN PARK

State

NJ

Zip Code

07035

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

262.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y - Y
08 / 15 / 2016

Transaction ID : SA11AI.54168

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOHN SILLIMAN 070

Mailing Address 16 JARDINE LN

City

LINCOLN PARK

State

NJ

Zip Code

07035

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

INVESTOR

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y - Y
08 / 15 / 2016

Transaction ID : SA11AI.54169

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS GENEVA H SIMPSON 411

Mailing Address 4862 W KY 9

City

VANCEBURG

State

KY

Zip Code

41179

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y - Y
08 / 29 / 2016

Transaction ID : SA11AI.54202

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

335.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS JOAN SINEX 950

Mailing Address 3400 PAUL SWEET RD UNIT C

City State Zip Code
 SANTA CRUZ CA 95065

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1016.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.54209

Amount of Each Receipt this Period

36.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ELENOR SMITH 060

Mailing Address 100 BREEZY HILL RD

City State Zip Code
 COLLINSVILLE CT 06019

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.54256

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS BETTY M SMITH 296

Mailing Address 1101 SMITHLAND BND

City State Zip Code
 ANDERSON SC 29621

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.54282

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

336.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM D SMITH 492

Mailing Address 9091 KINGSLEY DR

City

ONSTED

State

MI

Zip Code

49265

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.54295

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DR HELEN SMITH 631

Mailing Address PO BOX 221051

City

SAINT LOUIS

State

MO

Zip Code

63122

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

PSYCHIATRIST

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 30 / 2016

Transaction ID : SA11AI.54306

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACK SMITH 653

Mailing Address 177 BOUNDARY LN

City

OTTERVILLE

State

MO

Zip Code

65348

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARMER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

670.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 12 / 2016

Transaction ID : SA11AI.54307

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

585.00

TOTAL This Period (last page this line number only)..... ►

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JACK SMITH 653

Mailing Address 177 BOUNDARY LN

City
OTTERVILLE

State Zip Code
MO 65348

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARMER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

770.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 18 / 2016

Transaction ID : SA11AI.54308

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. JACK SMITH 653

Mailing Address 177 BOUNDARY LN

City
OTTERVILLE

State Zip Code
MO 65348

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARMER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 25 / 2016

Transaction ID : SA11AI.54309

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JACK SMITH 653

Mailing Address 177 BOUNDARY LN

City
OTTERVILLE

State Zip Code
MO 65348

FEC ID number of contributing
federal political committee.

C

Name of Employer

FARMER

Occupation

SELF EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

870.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 25 / 2016

Transaction ID : SA11AI.54310

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

200.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS DORA G SMITH 852

Mailing Address 26613 S RIBBONWOOD DR

City	State	Zip Code
SUN LAKES	AZ	85248

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8					1	9			2	0

Transaction ID : SA11AI.54327

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS DORA G SMITH 852

Mailing Address 26613 S RIBBONWOOD DR

City	State	Zip Code
SUN LAKES	AZ	85248

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8					1	2			2	0

Transaction ID : SA11AI.54328

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS GEORGIA SMULL 982

Mailing Address 2400 DONOVAN AVE TRLR 38

City	State	Zip Code
BELLINGHAM	WA	98225

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8					1	5			2	0

Transaction ID : SA11AI.54341

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. WARREN SNYDER 953

Mailing Address 2125 N OLIVE AVE APT B42

City State Zip Code
 TURLOCK CA 95382

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.54368

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MARY J SPECK 640

Mailing Address 1103 BRISTOL DR

City State Zip Code
 RAYMORE MO 64083

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.54413

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARY J SPECK 640

Mailing Address 1103 BRISTOL DR

City State Zip Code
 RAYMORE MO 64083

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.54414

Amount of Each Receipt this Period

80.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

183.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MICHAEL SPERBER 810

Mailing Address 793 S JASPER DR

City State Zip Code
 PUEBLO WEST CO 81007

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 16 2016

Transaction ID : SA11AI.54423

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR KENNETH F SPITLER 770

Mailing Address 9502 BAYOU BROOK ST

City State Zip Code
 HOUSTON TX 77063

FEC ID number of contributing
federal political committee.

C

Name of Employer

GROCERS SUPPLY

Occupation

EXECUTIVE ADVISOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 16 2016

Transaction ID : SA11AI.54427

Amount of Each Receipt this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS CATHERINE SPRINGER 385

Mailing Address 257 BROGDEN RD

City State Zip Code
 SPARTA TN 38583

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
 08 25 2016

Transaction ID : SA11AI.54434

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

985.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS STELLA STADE 560

Mailing Address 2679 ALBION AVE APT 302

City State Zip Code
 FAIRMONT MN 56031

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.54443

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS STELLA STADE 560

Mailing Address 2679 ALBION AVE APT 302

City State Zip Code
 FAIRMONT MN 56031

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.54444

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. ROBERT G STEINER 919

Mailing Address PO BOX 514

City State Zip Code
 CHULA VISTA CA 91912

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.54492

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ROBERT G STEINER 919

Mailing Address PO BOX 514

City State Zip Code
 CHULA VISTA CA 91912

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.54493

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ROBERT G STEINER 919

Mailing Address PO BOX 514

City State Zip Code
 CHULA VISTA CA 91912

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

965.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 18 2016

Transaction ID : SA11AI.54494

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES E STEPHENS 625

Mailing Address 750 W MARION AVE

City State Zip Code
 FORSYTH IL 62535

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 04 2016

Transaction ID : SA11AI.54509

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR EDWARD STILES 405

Mailing Address 3168 ROXBURG DR

City

LEXINGTON

State

KY

Zip Code

40503

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.54544

Amount of Each Receipt this Period

225.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. ESTELLE STIMEL 720

Mailing Address 1435 BLUSTERY WAY

City

CONWAY

State

AR

Zip Code

72034

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.54545

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR THOMAS STOREY 482

Mailing Address 10101 AUSTRIAN WAY

City

OAK PARK

State

MI

Zip Code

48237

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
08 / 19 / 2016

Transaction ID : SA11AI.54574

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

370.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS RUTH STOVER 238

Mailing Address 3223 WOOD DALE RD

City

CHESTER

State

VA

Zip Code

23831

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.54578

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR BRUCE STRATHEARN 930

Mailing Address 2215 MONACO DR

City

OXNARD

State

CA

Zip Code

93035

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.54587

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS MARY ELLEN STROUP 483

Mailing Address 5719 BLANDFORD RD

City

BLOOMFIELD HILLS

State

MI

Zip Code

48302

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.54610

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CHRISTINE STRUMBOS 483

Mailing Address 257 PINE RIDGE DR

City

BLOOMFIELD

State

MI

Zip Code

48304

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

380.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.54620

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CHRISTINE STRUMBOS 483

Mailing Address 257 PINE RIDGE DR

City

BLOOMFIELD

State

MI

Zip Code

48304

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

430.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.54621

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CHRISTINE STRUMBOS 483

Mailing Address 257 PINE RIDGE DR

City

BLOOMFIELD

State

MI

Zip Code

48304

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

480.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.54622

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

<p>Full Name (Last, First, Middle Initial) A. CHRISTINE STRUMBOS 483</p> <p>Mailing Address 257 PINE RIDGE DR</p> <p>City BLOOMFIELD State MI Zip Code 48304</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NONE Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 530.00</p>			<p>Date of Receipt 08 / 18 / 2016 Transaction ID : SA11AI.54623 </p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Memo Item</p>	
<p>Full Name (Last, First, Middle Initial) B. CHRISTINE STRUMBOS 483</p> <p>Mailing Address 257 PINE RIDGE DR</p> <p>City BLOOMFIELD State MI Zip Code 48304</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NONE Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 580.00</p>			<p>Date of Receipt 08 / 23 / 2016 Transaction ID : SA11AI.54624 </p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Memo Item</p>	
<p>Full Name (Last, First, Middle Initial) C. MR DAVID STUMBAUGH 223</p> <p>Mailing Address 7623 HAYFIELD RD</p> <p>City ALEXANDRIA State VA Zip Code 22315</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NONE Occupation RETIRED</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ </p> <p>Aggregate Year-to-Date ▼ 275.00</p>			<p>Date of Receipt 08 / 18 / 2016 Transaction ID : SA11AI.54629 </p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Memo Item</p>	
<p>SUBTOTAL of Receipts This Page (optional)..... ▶</p>			150.00	
<p>TOTAL This Period (last page this line number only)..... ▶</p>				

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DAVID STUMBAUGH 223

Mailing Address 7623 HAYFIELD RD

City

ALEXANDRIA

State

VA

Zip Code

22315

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.54630

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ALICE SUMIDA 972

Mailing Address 2309 SW 1ST AVE APT 1545

City

PORTLAND

State

OR

Zip Code

97201

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.54651

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS ROZENE R SUPPLE 922

Mailing Address 1850 SMOKE TREE LN

City

PALM SPRINGS

State

CA

Zip Code

92264

FEC ID number of contributing
federal political committee.

C

Name of Employer

KPSI RADIO CORP

Occupation

CORP OFFICER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.54670

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD KEARN SURGEON 620

Mailing Address PO BOX 363

City

JERSEYVILLE

State

IL

Zip Code

62052

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : SA11AI.54676

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DONALD KEARN SURGEON 620

Mailing Address PO BOX 363

City

JERSEYVILLE

State

IL

Zip Code

62052

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.54677

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RALPH SVEHAUG 981

Mailing Address 1706 CALIFORNIA AVE SW APT 40

City

SEATTLE

State

WA

Zip Code

98116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.54691

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

135.00

TOTAL This Period (last page this line number only)..... ►

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Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RALPH SVEHAUG 981

Mailing Address 1706 CALIFORNIA AVE SW APT 40

City State Zip Code
SEATTLE WA 98116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.54692

Amount of Each Receipt this Period

53.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR WAYNE TAMBLYN 894

Mailing Address 2109 CORLEONE DR

City State Zip Code
SPARKS NV 89434

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.54754

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR TERRY TANNER 337

Mailing Address 323 SNELL ISLE BLVD NE

City State Zip Code
SAINT PETERSBURG FL 33704

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.54755

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

138.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR TERRY TANNER 337

Mailing Address 323 SNELL ISLE BLVD NE

City State Zip Code
 SAINT PETERSBURG FL 33704

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 15 2016

Transaction ID : SA11AI.54756

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR TERRY TANNER 337

Mailing Address 323 SNELL ISLE BLVD NE

City State Zip Code
 SAINT PETERSBURG FL 33704

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 31 2016

Transaction ID : SA11AI.54757

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RAY U TANNER 383

Mailing Address 14 WHITSITT PARK

City State Zip Code
 JACKSON TN 38301

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M = M / D = D / Y = Y Y Y Y
 08 04 2016

Transaction ID : SA11AI.54758

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR RAY U TANNER 383

Mailing Address 14 WHITSITT PARK

City
JACKSON

State Zip Code
TN 38301

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 16 / 2016

Transaction ID : SA11AI.54759

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. STANLEY TATE 331

Mailing Address 1175 NE 125TH ST STE 102

City
NORTH MIAMI

State Zip Code
FL 33161

FEC ID number of contributing
federal political committee.

C

Name of Employer

STANLEY TATE BUILDERS INC

Occupation

OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 01 / 2016

Transaction ID : SA11AI.54777

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS FLORENE L TEINERT 786

Mailing Address 2917 PLANTATION DR

City
ROUND ROCK

State Zip Code
TX 78681

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

WIDOW

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 29 / 2016

Transaction ID : SA11AI.54812

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

230.00

TOTAL This Period (last page this line number only)..... ▶

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. GARY L TEPAS 600

Mailing Address 2022 CHEVIOT DR

City
INVERNESS

State Zip Code
IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.54817

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS JEANNETTE L THERRIAULT 997

Mailing Address 2473 OLD RICHARDSON HWY

City
NORTH POLE

State Zip Code
AK 99705

FEC ID number of contributing
federal political committee.

C

Name of Employer

HECTORS WELDING

Occupation

OFFICE WORK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.54834

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS JEANNETTE L THERRIAULT 997

Mailing Address 2473 OLD RICHARDSON HWY

City
NORTH POLE

State Zip Code
AK 99705

FEC ID number of contributing
federal political committee.

C

Name of Employer

HECTORS WELDING

Occupation

OFFICE WORK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.54835

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

570.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS JEANNETTE L THERRIAULT 997

Mailing Address 2473 OLD RICHARDSON HWY

City State Zip Code
NORTH POLE AK 99705

FEC ID number of contributing
federal political committee.

C

Name of Employer
HECTORS WELDING

Occupation
OFFICE WORK

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.54836

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS JANE L THOMPSON 730

Mailing Address 21650 SPUR

City State Zip Code
HINTON OK 73047

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.54865

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR NORMAN THOMS 665

Mailing Address 5420 SE 37TH ST

City State Zip Code
TECUMSEH KS 66542

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.54872

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

280.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR NORMAN THOMS 665

Mailing Address 5420 SE 37TH ST

City

TECUMSEH

State

KS

Zip Code

66542

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2016

Transaction ID : SA11AI.54873

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR NORMAN THOMS 665

Mailing Address 5420 SE 37TH ST

City

TECUMSEH

State

KS

Zip Code

66542

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 24 / 2016

Transaction ID : SA11AI.54874

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR EDMUND B THORNTON 613

Mailing Address PO BOX 1

City

OTTAWA

State

IL

Zip Code

61350

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.54880

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

315.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DOROTHY THROP 970

Mailing Address 8607 SE CAUSEY AVE APT 115

City State Zip Code
HAPPY VALLEY OR 97086

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.54885

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS KETURAH THUNDER-HAAB 481

Mailing Address 436 PINE BRAE ST

City State Zip Code
ANN ARBOR MI 48105

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2325.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.54886

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS KETURAH THUNDER-HAAB 481

Mailing Address 436 PINE BRAE ST

City State Zip Code
ANN ARBOR MI 48105

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2375.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.54887

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

200.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS SADIE TIMMONS 661

Mailing Address 3817 BOOTH ST

City

KANSAS CITY

State

KS

Zip Code

66103

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.54899

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ROBERT Y TOKUNAGA 285

Mailing Address 401 FOXTRACE LN

City

HUBERT

State

NC

Zip Code

28539

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.54919

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS ADELAIDE TONG 941

Mailing Address 1482 CLAY ST

City

SAN FRANCISCO

State

CA

Zip Code

94109

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.54937

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

575.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS BARBARA TOPKIS 902

Mailing Address 1753 SAN YSIDRO DR

City State Zip Code
 BEVERLY HILLS CA 90210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 18 / 2016

Transaction ID : SA11AI.54939

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JOHN S TOWNSEND 988

Mailing Address 8306 ROAD 3.2 NE

City State Zip Code
 MOSES LAKE WA 98837

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 31 / 2016

Transaction ID : SA11AI.54950

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MIKE TOWSON 314

Mailing Address 1 BISHOPWOOD CT

City State Zip Code
 SAVANNAH GA 31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 11 / 2016

Transaction ID : SA11AI.54953

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MIKE TOWSON 314

Mailing Address 1 BISHOPWOOD CT

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

615.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.54954

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MIKE TOWSON 314

Mailing Address 1 BISHOPWOOD CT

City

SAVANNAH

State

GA

Zip Code

31411

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

665.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.54955

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CHESTER W TRITES 565

Mailing Address PO BOX 68

City

PELICAN RAPIDS

State

MN

Zip Code

56572

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.54984

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR CHESTER W TRITES 565

Mailing Address PO BOX 68

City State Zip Code
 PELICAN RAPIDS MN 56572

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.54985

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DR ROCCO TRITICO 286

Mailing Address PO BOX 803

City State Zip Code
 STATESVILLE NC 28687

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

DOCTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.54987

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT S TROTH 341

Mailing Address 3003 GULF SHORE BLVD N APT 301

City State Zip Code
 NAPLES FL 34103

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

08 / 12 / 2016

Transaction ID : SA11AI.54992

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

535.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROBERT S TROTH 341

Mailing Address 3003 GULF SHORE BLVD N APT 301

City	State	Zip Code
NAPLES	FL	34103

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	1	6

Transaction ID : SA11AI.54993

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS CARMEN TURNBILL 925

Mailing Address PO BOX 4176

City	State	Zip Code
RIVERSIDE	CA	92514

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	5		2	0	1	6

Transaction ID : SA11AI.55022

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS CARMEN TURNBILL 925

Mailing Address PO BOX 4176

City	State	Zip Code
RIVERSIDE	CA	92514

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	6

Transaction ID : SA11AI.55023

Amount of Each Receipt this Period

53.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

338.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM TURNER 312

Mailing Address 2814 WALDEN RD

City

MACON

State

GA

Zip Code

31216

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.55026

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR CALVIN K UPP 671

Mailing Address 212 E ELM ST

City

WELLINGTON

State

KS

Zip Code

67152

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

290.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.55066

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR CALVIN K UPP 671

Mailing Address 212 E ELM ST

City

WELLINGTON

State

KS

Zip Code

67152

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.55067

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

425.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ATLEY USENER 786

Mailing Address 303 E WALNUT ST

City	State	Zip Code
FREDERICKSBURG	TX	78624

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	02	/	2016

Transaction ID : SA11AI.55070

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ATLEY USENER 786

Mailing Address 303 E WALNUT ST

City	State	Zip Code
FREDERICKSBURG	TX	78624

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	02	/	2016

Transaction ID : SA11AI.55071

Amount of Each Receipt this Period

11.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ATLEY USENER 786

Mailing Address 303 E WALNUT ST

City	State	Zip Code
FREDERICKSBURG	TX	78624

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	16	/	2016

Transaction ID : SA11AI.55072

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

31.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ATLEY USENER 786

Mailing Address 303 E WALNUT ST

City State Zip Code
FREDERICKSBURG TX 78624

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.55073

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR ATLEY USENER 786

Mailing Address 303 E WALNUT ST

City State Zip Code
FREDERICKSBURG TX 78624

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.55074

Amount of Each Receipt this Period

10.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ATLEY USENER 786

Mailing Address 303 E WALNUT ST

City State Zip Code
FREDERICKSBURG TX 78624

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.55075

Amount of Each Receipt this Period

10.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

30.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR STAN VAN OTTERLOO 512

Mailing Address 3821 LILY AVE

City
HOSPERSState
IAZip Code
51238FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	5		2	0	1	6

Transaction ID : SA11AI.55096

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR STAN VAN OTTERLOO 512

Mailing Address 3821 LILY AVE

City
HOSPERSState
IAZip Code
51238FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	1	6

Transaction ID : SA11AI.55097

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR EARL J VENABLE 705

Mailing Address PO BOX 81296

City
LAFAYETTEState
LAZip Code
70598FEC ID number of contributing
federal political committee.

C

Name of Employer

VENABLE & ASSOCIATES

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	9		2	0	1	6

Transaction ID : SA11AI.55121

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

170.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MISS HELEN VIERGEVER 665

Mailing Address PO BOX 41

City

ROSSVILLE

State

KS

Zip Code

66533

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.55140

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS HELEN VIERGEVER 665

Mailing Address PO BOX 41

City

ROSSVILLE

State

KS

Zip Code

66533

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / 31 / 2016

Transaction ID : SA11AI.55141

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR RICHARD VOELL 068

Mailing Address 25 PILOT ROCK LN

City

RIVERSIDE

State

CT

Zip Code

06878

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3400.00

Date of Receipt

08 / 15 / 2016

Transaction ID : SA11AI.55156

Amount of Each Receipt this Period

3000.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3085.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FRED H VOLLBEER 305

Mailing Address 72 DEER PATH

City

DAHLONEGA

State

GA

Zip Code

30533

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.55159

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DALE A VON STEEN 836

Mailing Address 2615 S INGLENOOK PL

City

MERIDIAN

State

ID

Zip Code

83642

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

230.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.55167

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DALE A VON STEEN 836

Mailing Address 2615 S INGLENOOK PL

City

MERIDIAN

State

ID

Zip Code

83642

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.55168

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

345.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 274 OF 369
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MARLENE J VOS 495

Mailing Address 3013 WINDCREST WAY NE

City	State	Zip Code
GRAND RAPIDS	MI	49525

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	6		2	0	1	6		

Transaction ID : SA11AI.55179

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MISS CAMILLE WAGNER 402

Mailing Address 6004 GLEN HILL RD

City	State	Zip Code
LOUISVILLE	KY	40222

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	5		2	0	1	6		

Transaction ID : SA11AI.55203

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT L WALDEN 647

Mailing Address 34 NW 1144 PRIVATE RD

City	State	Zip Code
LEETON	MO	64761

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		0	1		2	0	1	6		

Transaction ID : SA11AI.55213

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

625.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR KENNETH C WALDO 276 JR

Mailing Address 1000 DEERFIELD RD

City

RALEIGH

State

NC

Zip Code

27609

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

960.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 08 / 2016

Transaction ID : SA11AI.55217

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR KENNETH C WALDO 276 JR

Mailing Address 1000 DEERFIELD RD

City

RALEIGH

State

NC

Zip Code

27609

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 15 / 2016

Transaction ID : SA11AI.55218

Amount of Each Receipt this Period

140.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MARK WALKER 410

Mailing Address 3845 AKIN LN

City

BURLINGTON

State

KY

Zip Code

41005

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALKER REMODELING CO

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M = M / D = D / Y = Y - Y - Y
08 / 25 / 2016

Transaction ID : SA11AI.55230

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

290.00

TOTAL This Period (last page this line number only)..... ▶

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MARK WALKER 410

Mailing Address 3845 AKIN LN

City

BURLINGTON

State

KY

Zip Code

41005

FEC ID number of contributing
federal political committee.

C

Name of Employer

WALKER REMODELING CO

Occupation

BUSINESS OWNER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.55231

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR J D WALKER 761

Mailing Address 6917 BAL LAKE DR

City

FORT WORTH

State

TX

Zip Code

76116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.55236

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR J D WALKER 761

Mailing Address 6917 BAL LAKE DR

City

FORT WORTH

State

TX

Zip Code

76116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

395.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 09 / 2016

Transaction ID : SA11AI.55237

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

115.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR J D WALKER 761

Mailing Address 6917 BAL LAKE DR

City State Zip Code
 FORT WORTH TX 76116

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

NOT EMPLOYED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.55238

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS DELILA M WARD 975

Mailing Address 2311 SCOVILLE RD

City State Zip Code
 GRANTS PASS OR 97526

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.55282

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS DELILA M WARD 975

Mailing Address 2311 SCOVILLE RD

City State Zip Code
 GRANTS PASS OR 97526

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.55283

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

130.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS DELILA M WARD 975

Mailing Address 2311 SCOVILLE RD

City

GRANTS PASS

State

OR

Zip Code

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

330.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.55284

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS DELILA M WARD 975

Mailing Address 2311 SCOVILLE RD

City

GRANTS PASS

State

OR

Zip Code

97526

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.00

Date of Receipt

08 / 30 / 2016

Transaction ID : SA11AI.55285

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DONALD WARREN 725

Mailing Address 1000 OLD UNION RD

City

FLORAL

State

AR

Zip Code

72534

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 30 / 2016

Transaction ID : SA11AI.55305

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. ADRIENNE WATKINS 338

Mailing Address 7 BROGDEN CT SE

City

WINTER HAVEN

State

FL

Zip Code

33880

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.55328

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JEFFREY S WATSON 168

Mailing Address 1232 PINE CIR

City

BELLEFONTE

State

PA

Zip Code

16823

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

233.00

Date of Receipt

08 / 03 / 2016

Transaction ID : SA11AI.55333

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ALLEN Z WEAVER 144

Mailing Address 3700 STATE ROUTE 247

City

CANANDAIGUA

State

NY

Zip Code

14424

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

235.00

Date of Receipt

08 / 08 / 2016

Transaction ID : SA11AI.55345

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

210.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ALLEN Z WEAVER 144

Mailing Address 3700 STATE ROUTE 247

City

CANANDAIGUA

State

NY

Zip Code

14424

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.55346

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR LEWIS R WEBB 767

Mailing Address 1718 NORTHCREST DR

City

WACO

State

TX

Zip Code

76710

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

CITY MAIL CARRIER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

226.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.55358

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR LEWIS R WEBB 767

Mailing Address 1718 NORTHCREST DR

City

WACO

State

TX

Zip Code

76710

FEC ID number of contributing
federal political committee.

C

Name of Employer

USPS

Occupation

CITY MAIL CARRIER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

276.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.55359

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

135.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DR URSULA WEBER 100 MD

Mailing Address 245 E 19TH ST APT 11A

City

NEW YORK

State

NY

Zip Code

10003

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

PHYSICIAN

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : SA11AI.55368

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS CHARLENE WEBER 722

Mailing Address 14300 CHENAL PKWY APT 1117

City

LITTLE ROCK

State

AR

Zip Code

72211

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

221.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 05 / 2016

Transaction ID : SA11AI.55373

Amount of Each Receipt this Period

76.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS CHARLENE WEBER 722

Mailing Address 14300 CHENAL PKWY APT 1117

City

LITTLE ROCK

State

AR

Zip Code

72211

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

271.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : SA11AI.55374

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

176.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS CHARLENE WEBER 722

Mailing Address 14300 CHENAL PKWY APT 1117

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

321.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 08 / 2016

Transaction ID : SA11AI.55375

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS CHARLENE WEBER 722

Mailing Address 14300 CHENAL PKWY APT 1117

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

371.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 22 / 2016

Transaction ID : SA11AI.55376

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS CHARLENE WEBER 722

Mailing Address 14300 CHENAL PKWY APT 1117

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

446.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 25 / 2016

Transaction ID : SA11AI.55377

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS CHARLENE WEBER 722

Mailing Address 14300 CHENAL PKWY APT 1117

City State Zip Code
 LITTLE ROCK AR 72211

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

491.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 25 2016

Transaction ID : SA11AI.55378

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS ANNIE WEEKS 352

Mailing Address 3411 ROCK LN

City State Zip Code
 IRONDALE AL 35210

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 29 2016

Transaction ID : SA11AI.55386

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ROBERT N WEEKS 800

Mailing Address 7833 WEBSTER WAY

City State Zip Code
 ARVADA CO 80003

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 16 2016

Transaction ID : SA11AI.55387

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

145.00

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS MARY WEIDEN 127

Mailing Address 25 NEWEIDEN RD

City

NARROWSBURG

State

NY

Zip Code

12764

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

227.73

Date of Receipt

08 / 05 / 2016

Transaction ID : SA11AI.55399

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR N BRUCE WEIR 190

Mailing Address 322 SYLVANIA AVE

City

GLENSIDE

State

PA

Zip Code

19038

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

226.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.55411

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS MARGARET C WELSH 940

Mailing Address 643 MONTEZUMA DR

City

PACIFICA

State

CA

Zip Code

94044

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

236.00

Date of Receipt

08 / 26 / 2016

Transaction ID : SA11AI.55433

Amount of Each Receipt this Period

45.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

185.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 285 OF 369
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. HELEN WETSEL 228

Mailing Address 1491 VIRGINIA AVE

City	State	Zip Code
HARRISONBURG	VA	22802

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	5		2	0	1	6		

Transaction ID : SA11AI.55464

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS VIRGINIA WHEELER 403

Mailing Address PO BOX 217

City	State	Zip Code
MOREHEAD	KY	40351

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		3	1		2	0	1	6		

Transaction ID : SA11AI.55474

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JAMES W WHITCOMB 981

Mailing Address 620 S 198TH ST

City	State	Zip Code
SEATTLE	WA	98148

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENGINEERING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

490.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	8		1	1		2	0	1	6		

Transaction ID : SA11AI.55481

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

300.00

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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(check only one)

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR JAMES W WHITCOMB 981

Mailing Address 620 S 198TH ST

City
SEATTLE

State Zip Code
WA 98148

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENGINEERING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

08 / 19 / 2016

Transaction ID : SA11AI.55482

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JAMES W WHITCOMB 981

Mailing Address 620 S 198TH ST

City
SEATTLE

State Zip Code
WA 98148

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ENGINEERING CONSULTANT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

08 / 24 / 2016

Transaction ID : SA11AI.55483

Amount of Each Receipt this Period

90.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS ELAINE W WHITEHURST 303

Mailing Address 3747 PEACHTREE RD NE #1008

City
ATLANTA

State Zip Code
GA 30319

FEC ID number of contributing
federal political committee.

C

Name of Employer

HART & SULLIVAN PC

Occupation

CHIEF EXECUTIVE OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 18 / 2016

Transaction ID : SA11AI.55510

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

155.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM H WIGGINS 310

Mailing Address PO BOX 28

City State Zip Code
SANDERSVILLE GA 31082

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.55539

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR MICHAEL WILKINSON 945

Mailing Address 900 SOUTHAMPTON RD APT 47

City State Zip Code
BENICIA CA 94510

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.55561

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MICHAEL WILKINSON 945

Mailing Address 900 SOUTHAMPTON RD APT 47

City State Zip Code
BENICIA CA 94510

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.55562

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

120.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR MICHAEL WILKINSON 945

Mailing Address 900 SOUTHAMPTON RD APT 47

City State Zip Code
BENICIA CA 94510

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

323.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.55563

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR HENRY WILLARD 254

Mailing Address PO BOX 3269

City State Zip Code
SHEPHERDSTOWN WV 25443

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.55564

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR EDWIN H WILLIAMS 245

Mailing Address 1290 RAINBOW FOREST DR

City State Zip Code
LYNCHBURG VA 24502

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 02 / 2016

Transaction ID : SA11AI.55578

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

335.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ROGER WILLIAMS 600

Mailing Address 24291 N FOREST DR

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.55589

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR G RONALD WILSON 166

Mailing Address 226 KEISHA LN

City

ALTOONA

State

PA

Zip Code

16601

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

215.00

Date of Receipt

08 / 16 / 2016

Transaction ID : SA11AI.55617

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR ARTHUR E WINDEN 782

Mailing Address 11503 SAYANORA CT

City

SAN ANTONIO

State

TX

Zip Code

78216

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.55644

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

345.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS LORRAINE WINK 601

Mailing Address 611 S OAKLAND AVE

City

VILLA PARK

State

IL

Zip Code

60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

205.00

Date of Receipt

08 / 01 / 2016

Transaction ID : SA11AI.55649

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS LORRAINE WINK 601

Mailing Address 611 S OAKLAND AVE

City

VILLA PARK

State

IL

Zip Code

60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

245.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.55650

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS LORRAINE WINK 601

Mailing Address 611 S OAKLAND AVE

City

VILLA PARK

State

IL

Zip Code

60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

08 / 25 / 2016

Transaction ID : SA11AI.55651

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

115.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MS LORRAINE WINK 601

Mailing Address 611 S OAKLAND AVE

City State Zip Code
 VILLA PARK IL 60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 26 / 2016

Transaction ID : SA11AI.55652

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. GINGER B WINKELMANN 770

Mailing Address 19814 TIMBERWIND LN

City State Zip Code
 HOUSTON TX 77094

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

RANCHER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 05 / 2016

Transaction ID : SA11AI.55653

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. WILMA I WISER 534

Mailing Address 3900 N MAIN ST APT 229

City State Zip Code
 RACINE WI 53402

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.55678

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. WILMA I WISER 534

Mailing Address 3900 N MAIN ST APT 229

City State Zip Code
RACINE WI 53402

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

695.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2016

Transaction ID : SA11AI.55679

Amount of Each Receipt this Period

45.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MS GISELA WOIWODE-DALES 296

Mailing Address 8 GARY AVE

City State Zip Code
TAYLORS SC 29687

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.55693

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MS GISELA WOIWODE-DALES 296

Mailing Address 8 GARY AVE

City State Zip Code
TAYLORS SC 29687

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.55694

Amount of Each Receipt this Period

30.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR ARNOLD WOLF 655

Mailing Address 17256 HIGHWAY 32

City

LICKING

State

MO

Zip Code

65542

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

FARMER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 04 / 2016

Transaction ID : SA11AI.55698

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR DONALD H WOLGEMUTH 176

Mailing Address PO BOX 5093

City

LANCASTER

State

PA

Zip Code

17606

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 01 / 2016

Transaction ID : SA11AI.55710

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR DONALD H WOLGEMUTH 176

Mailing Address PO BOX 5093

City

LANCASTER

State

PA

Zip Code

17606

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 03 / 2016

Transaction ID : SA11AI.55711

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

175.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR DONALD H WOLGEMUTH 176

Mailing Address PO BOX 5093

City
LANCASTER

State Zip Code
PA 17606

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.55712

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR JUDSON A WOOD 378

Mailing Address 8055 ERIE RD

City
SWEETWATER

State Zip Code
TN 37874

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 01 / 2016

Transaction ID : SA11AI.55719

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR JUDSON A WOOD 378

Mailing Address 8055 ERIE RD

City
SWEETWATER

State Zip Code
TN 37874

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2016

Transaction ID : SA11AI.55720

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

185.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR PAUL WOODS 781

Mailing Address 1933 N INTERSTATE 35

City State Zip Code
NEW BRAUNFELS TX 78130

FEC ID number of contributing
federal political committee.

C

Name of Employer
WOODS CYCLE MANAGEMENT LLC

Occupation
BUSINESS OWNER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.55737

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS VERGIE R WOODWARD 852

Mailing Address 1405 E WHALERS WAY

City State Zip Code
TEMPE AZ 85283

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 31 / 2016

Transaction ID : SA11AI.55741

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. JOHN C WORLEY 327

Mailing Address 7015 RED BUG LAKE RD APT 237

City State Zip Code
OVIEDO FL 32765

FEC ID number of contributing
federal political committee.

C

Name of Employer
NONE

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 29 / 2016

Transaction ID : SA11AI.55757

Amount of Each Receipt this Period

35.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

535.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR WILLIAM M YOUNG 170 JR

Mailing Address 625 COUNTRY CLUB RD

City

CAMP HILL

State

PA

Zip Code

17011

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

ATTORNEY

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2016

Transaction ID : SA11AI.55823

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MR GUY YOUNGBERG 780

Mailing Address 29535 SUMMER SWEET

City

BOERNE

State

TX

Zip Code

78015

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 09 / 2016

Transaction ID : SA11AI.55837

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MR MICHAEL E YUKICH 604

Mailing Address 1247 187TH ST

City

HOMEWOOD

State

IL

Zip Code

60430

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

08 / 02 / 2016

Transaction ID : SA11AI.55844

Amount of Each Receipt this Period

15.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

165.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MR A EARL ZIEGLER 752

Mailing Address PO BOX 25402

City	State	Zip Code
DALLAS	TX	75225

FEC ID number of contributing
federal political committee.

C

Name of Employer

A EARL & FRANCES E ZIEGLER FOUNDATIO

Occupation

CHAIRMAN

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	15	/	2016

Transaction ID : SA11AI.55874

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MRS AUDREY ZIMMER 564

Mailing Address 509 7TH ST NE

City	State	Zip Code
STAPLES	MN	56479

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	02	/	2016

Transaction ID : SA11AI.55878

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MRS AUDREY ZIMMER 564

Mailing Address 509 7TH ST NE

City	State	Zip Code
STAPLES	MN	56479

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M = M	/	D = D	/	Y = Y Y = Y Y
08	/	22	/	2016

Transaction ID : SA11AI.55879

Amount of Each Receipt this Period

45.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ►

280.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MRS AUDREY ZIMMER 564

Mailing Address 509 7TH ST NE

City
STAPLES

State Zip Code
MN 56479

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 23 / 2016

Transaction ID : SA11AI.55880

Amount of Each Receipt this Period

35.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LOIS ZIMMERMAN 337

Mailing Address 6909 DR MRTN LUTHER KING JR ST S A

City

SAINT PETERSBURG

State Zip Code
FL 33705

FEC ID number of contributing
federal political committee.

C

Name of Employer

NONE

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 18 / 2016

Transaction ID : SA11AI.55882

Amount of Each Receipt this Period

113.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

148.00

96998.52

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 299 OF 369

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. INTEGRAM

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3017.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 31 2016

Transaction ID : SA15.56713

Amount of Each Receipt this Period

237.00

☐ Memo Item

REFUND

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

237.00

237.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. JOHN CANEGATA

Mailing Address PO BOX 295

City	State	Zip Code
CHRISTIANSTED	VI	00821

Purpose of Disbursement
REIMBURSED AUGUST EXPENSES

Candidate Name

VIGOP

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		16		2016

Transaction ID : SB21B.56178

Amount of Each Disbursement this Period

903.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL CAGING CORPMailing Address 504 SHAW RD
SUITE 206

City	State	Zip Code
STERLING	VA	20166

Purpose of Disbursement
PO BOX RENEWAL

Candidate Name

VIGOP

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SB21B.56641

Amount of Each Disbursement this Period

718.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL CAGING CORPMailing Address 504 SHAW RD
SUITE 206

City	State	Zip Code
STERLING	VA	20166

Purpose of Disbursement
PO BOX RENEWAL

Candidate Name

VIGOP

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SB21B.56642

Amount of Each Disbursement this Period

718.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2339.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 301 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CAPITOL CAGING CORPMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
PO BOX RENEWAL

001

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2016

Transaction ID : SB21B.56643

Amount of Each Disbursement this Period

718.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL CAGING CORPMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
CAGING SERVICES

001

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56644

Amount of Each Disbursement this Period

212.65

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CAPITOL CAGING CORPMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
BRE POSTAGE DEPOSIT

001

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2016

Transaction ID : SB21B.56645

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1930.65

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CAPITOL CAGING CORPMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
CAGING SERVICES

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SB21B.56649

Amount of Each Disbursement this Period

847.39

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CAPITOL CAGING CORPMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
BRE POSTAGE DEPOSIT

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	29	/	2016

Transaction ID : SB21B.56650

Amount of Each Disbursement this Period

3500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2016

Transaction ID : SB21B.56651

Amount of Each Disbursement this Period

1076.22

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5423.61

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2016

Transaction ID : SB21B.56652

Amount of Each Disbursement this Period

69.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	04	/	2016

Transaction ID : SB21B.56653

Amount of Each Disbursement this Period

4427.23

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	11	/	2016

Transaction ID : SB21B.56654

Amount of Each Disbursement this Period

8973.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

13470.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2016

Mailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56655

Amount of Each Disbursement this Period

4136.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2016

Mailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56656

Amount of Each Disbursement this Period

9713.60

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2016

Mailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56657

Amount of Each Disbursement this Period

499.33

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14349.17

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 306 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56658

Amount of Each Disbursement this Period

377.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56659

Amount of Each Disbursement this Period

4272.16

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56660

Amount of Each Disbursement this Period

8052.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

12702.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. CONSOLIDATED MAILING SERVICESMailing Address 504 SHAW RD
SUITE 206

City STERLING State VA Zip Code 20166

Purpose of Disbursement
ALLOCATED TO LN 24

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Transaction ID : SB21B.56746

Amount of Each Disbursement this Period

-35357.96

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT SUPPORT SERVICES INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56157

Amount of Each Disbursement this Period

4265.66

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT SUPPORT SERVICES INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56158

Amount of Each Disbursement this Period

1734.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-29357.80

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 308 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DIRECT SUPPORT SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		04		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56159

Amount of Each Disbursement this Period

3318.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT SUPPORT SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56160

Amount of Each Disbursement this Period

10176.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT SUPPORT SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56161

Amount of Each Disbursement this Period

3795.35

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

17289.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DIRECT SUPPORT SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56162

Amount of Each Disbursement this Period

9224.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DIRECT SUPPORT SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - POSTAGE

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56163

Amount of Each Disbursement this Period

2871.21

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DIRECT SUPPORT SERVICES INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
ALLOCATED TO LN 24

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56747

Amount of Each Disbursement this Period

-30078.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-17981.89

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 310 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56668

Amount of Each Disbursement this Period

178.79

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56669

Amount of Each Disbursement this Period

283.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56670

Amount of Each Disbursement this Period

140.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

602.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SB21B.56671

Amount of Each Disbursement this Period

175.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56672

Amount of Each Disbursement this Period

169.43

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
LIST ENHANCEMENT

003

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56673

Amount of Each Disbursement this Period

140.64

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

485.63

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DONOR BUREAU

Mailing Address 1900 N CULPEPPER ST

City
ARLINGTONState
VAZip Code
22207Purpose of Disbursement
ALLOCATED TO LN 24

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SB21B.56750

Amount of Each Disbursement this Period

-925.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DSSIMailing Address 1155 - 15TH STREET NW
SUITE 410City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
DATABASE SERVICES

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56661

Amount of Each Disbursement this Period

799.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DSSIMailing Address 1155 - 15TH STREET NW
SUITE 410City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
DATABASE SERVICES

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56662

Amount of Each Disbursement this Period

963.57

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

837.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DSSI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DATABASE SERVICES

001

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56663

Amount of Each Disbursement this Period

3418.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DSSI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DATABASE SERVICES

001

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56664

Amount of Each Disbursement this Period

2185.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DSSI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DATABASE SERVICES

001

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56665

Amount of Each Disbursement this Period

1880.28

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7483.69

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 314 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. DSSI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DATABASE SERVICES

001

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56666

Amount of Each Disbursement this Period

178.92

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. DSSI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
DATABASE SERVICES

001

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56667

Amount of Each Disbursement this Period

892.73

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DSSI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
ALLOCATED TO LN 24

001

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56748

Amount of Each Disbursement this Period

-8770.53

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

-7698.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 315 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56164

Amount of Each Disbursement this Period

190.07

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56165

Amount of Each Disbursement this Period

9.93

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		01		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56166

Amount of Each Disbursement this Period

32.53

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

232.53

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 316 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56167

Amount of Each Disbursement this Period

255.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		01		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
SERVICE CHARGE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56168

Amount of Each Disbursement this Period

114.13

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
CCCP MONTHLY FEE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56169

Amount of Each Disbursement this Period

82.50

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

452.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
CCCP MONTHLY FEE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56170

Amount of Each Disbursement this Period

33.75

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
CCCP MONTHLY FEE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56171

Amount of Each Disbursement this Period

98.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
CCCP MONTHLY FEE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56172

Amount of Each Disbursement this Period

58.25

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.50

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 318 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
TRANSFIRST DISCOUNT FEE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56173

Amount of Each Disbursement this Period

592.05

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
TRANSFIRST DISCOUNT FEE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56174

Amount of Each Disbursement this Period

159.52

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FIRST VIRGINIA COMMUNITY BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		10		2016

Mailing Address 11325 RANDOM HILLS RD

City	State	Zip Code
FAIRFAX	VA	22030

Purpose of Disbursement
TRANSFIRST DISCOUNT FEE

001

Candidate Name

VIGOPCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Transaction ID : SB21B.56175

Amount of Each Disbursement this Period

837.12

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1588.69

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 319 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FIRST VIRGINIA COMMUNITY BANK

Mailing Address 11325 RANDOM HILLS RD

City
FAIRFAXState
VAZip Code
22030Purpose of Disbursement
TRANSFIRST DISCOUNT FEE

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	10	/	2016

Transaction ID : SB21B.56176

Amount of Each Disbursement this Period

292.12

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FORTH RIGHT STRATEGY INCMailing Address 1155 - 15TH STREET NW
SUITE 410City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	04	/	2016

Transaction ID : SB21B.56674

Amount of Each Disbursement this Period

4222.53

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FORTH RIGHT STRATEGY INCMailing Address 1155 - 15TH STREET NW
SUITE 410City
WASHINGTONState
DCZip Code
20005Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	04	/	2016

Transaction ID : SB21B.56675

Amount of Each Disbursement this Period

1183.59

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5698.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 320 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FORTH RIGHT STRATEGY INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56676

Amount of Each Disbursement this Period

9000.36

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FORTH RIGHT STRATEGY INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56677

Amount of Each Disbursement this Period

2833.56

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FORTH RIGHT STRATEGY INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56678

Amount of Each Disbursement this Period

2649.87

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

14483.79

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 321 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FORTH RIGHT STRATEGY INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

003

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56679

Amount of Each Disbursement this Period

5210.91

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. FORTH RIGHT STRATEGY INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

003

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56680

Amount of Each Disbursement this Period

6809.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. FORTH RIGHT STRATEGY INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VIGOP DIRECT MAIL - MANAGEMENT & CREATIVE

003

Category/
Type

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB21B.56681

Amount of Each Disbursement this Period

8402.49

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20423.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 322 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. FORTH RIGHT STRATEGY INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
ALLOCATED TO LN 24

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SB21B.56751

Amount of Each Disbursement this Period

-34266.26

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56682

Amount of Each Disbursement this Period

4900.15

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. INTEGRAM

Mailing Address 8421 HILLTOP RD

City FAIRFAX State VA Zip Code 22031

Purpose of Disbursement
ALLOCATED TO LN 24

Candidate Name

VIGOPOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SB21B.56752

Amount of Each Disbursement this Period

-4165.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-33531.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 323 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56683

Amount of Each Disbursement this Period

205.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56689

Amount of Each Disbursement this Period

597.18

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
4,900.15

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56684

Amount of Each Disbursement this Period

344.46

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1147.06

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 324 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56685

Amount of Each Disbursement this Period

4832.19

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		18		2016

Transaction ID : SB21B.56686

Amount of Each Disbursement this Period

259.70

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56687

Amount of Each Disbursement this Period

4632.19

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9724.08

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 325 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
LIST RENTALS

003

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	25	/	2016

Transaction ID : SB21B.56688

Amount of Each Disbursement this Period

278.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. LEGACY LIST MANAGEMENT INCMailing Address 1155 - 15TH STREET NW
SUITE 410

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
ALLOCATED TO LN 24

003

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Transaction ID : SB21B.56754

Amount of Each Disbursement this Period

-9477.31

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. DENNIS LENNOX

Mailing Address PO BOX 295

City CHRISTIANSTED State VI Zip Code 00821

Purpose of Disbursement
REIMBURSED AUGUST EXPENSES

002

Candidate Name

VIGOPCategory/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	16	/	2016

Transaction ID : SB21B.56177

Amount of Each Disbursement this Period

2196.60

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

-7002.07

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 326 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56690

Amount of Each Disbursement this Period

988.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56691

Amount of Each Disbursement this Period

595.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56692

Amount of Each Disbursement this Period

740.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2323.40

TOTAL This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 327 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		11		2016

Transaction ID : SB21B.56693

Amount of Each Disbursement this Period

595.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SB21B.56694

Amount of Each Disbursement this Period

1081.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2016

Transaction ID : SB21B.56695

Amount of Each Disbursement this Period

721.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2397.40

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 328 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56696

Amount of Each Disbursement this Period

1271.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56697

Amount of Each Disbursement this Period

735.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. MACKENZIE & COMPANYMailing Address 2776 S ARLINGTON MILL DR
NUM 806

City ARLINGTON State VA Zip Code 22206

Purpose of Disbursement
CONSULTING - COMPLIANCE

001

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56698

Amount of Each Disbursement this Period

705.40

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2712.20

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 329 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. MDI IMAGING & MAIL

Mailing Address 21721-A FILIGREE CT

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
VIGOP DIRECT MAIL - PRINTING & MAILSHOP

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56699

Amount of Each Disbursement this Period

9120.49

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. MDI IMAGING & MAIL

Mailing Address 21721-A FILIGREE CT

City
ASHBURNState
VAZip Code
20147Purpose of Disbursement
ALLOCATED TO LN 24

003

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Transaction ID : SB21B.56753

Amount of Each Disbursement this Period

-7752.42

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SIMPKINS ESCROW LLC

Mailing Address ST JUST RD

City
UNIONVILLEState
VAZip Code
22567Purpose of Disbursement
ESCROW SERVICES

001

Category/
Type

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		04		2016

Transaction ID : SB21B.56700

Amount of Each Disbursement this Period

240.04

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1608.11

TOTAL This Period (last page this line number only)..... ►

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 330 OF 369

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

Full Name (Last, First, Middle Initial)

A. SIMPKINS ESCROW LLC

Mailing Address ST JUST RD

City
UNIONVILLEState
VAZip Code
22567Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56701

Amount of Each Disbursement this Period

1078.94

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. SIMPKINS ESCROW LLC

Mailing Address ST JUST RD

City
UNIONVILLEState
VAZip Code
22567Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56702

Amount of Each Disbursement this Period

399.28

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. SIMPKINS ESCROW LLC

Mailing Address ST JUST RD

City
UNIONVILLEState
VAZip Code
22567Purpose of Disbursement
ESCROW SERVICES

001

Candidate Name

VIGOP

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Transaction ID : SB21B.56703

Amount of Each Disbursement this Period

380.85

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1859.07

53127.42

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 331 OF 369

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CAPITOL CAGING CORPNature of Debt (Purpose):
CAGING SERVICESMailing Address 504 SHAW RD
SUITE 206City State Zip Code
STERLING VA 20166

Outstanding Balance Beginning This Period

3791.80

Transaction ID : SD10.45726

Amount Incurred This Period

10866.65

Payment This Period

14658.45

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

CONSOLIDATED MAILING SERVICESNature of Debt (Purpose):
DIRECT MAIL - PRINTING & MAILSHOPMailing Address 504 SHAW RD
SUITE 206City State Zip Code
STERLING VA 20166

Outstanding Balance Beginning This Period

90832.92

Transaction ID : SD10.4171

Amount Incurred This Period

97066.83

Payment This Period

41597.60

Outstanding Balance at Close of This Period

146302.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DONOR BUREAUNature of Debt (Purpose):
LIST ENHANCEMENTS

Mailing Address 1900 N CULPEPPER ST

City State Zip Code
ARLINGTON VA 22207

Outstanding Balance Beginning This Period

2069.86

Transaction ID : SD10.4174

Amount Incurred This Period

1548.08

Payment This Period

1088.32

Outstanding Balance at Close of This Period

2529.62

1) **SUBTOTALS** This Period This Page (optional)..... ►

148831.77

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 332 OF 369

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

DSSINature of Debt (Purpose):
DATA PROCESSINGMailing Address 1155 - 15TH STREET NW
SUITE 410City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

12229.64

Transaction ID : SD10.4168

Amount Incurred This Period

15782.53

Payment This Period

10318.27

Outstanding Balance at Close of This Period

17693.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

FORTH RIGHT STRATEGY INCNature of Debt (Purpose):
DIRECT MAIL - CREATIVEMailing Address 1155 - 15TH STREET NW
SUITE 410City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

171306.18

Transaction ID : SD10.4166

Amount Incurred This Period

15883.74

Payment This Period

40313.25

Outstanding Balance at Close of This Period

146876.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

INTEGRAMNature of Debt (Purpose):
DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 8421 HILLTOP RD

City State Zip Code
FAIRFAX VA 22031

Outstanding Balance Beginning This Period

10512.28

Transaction ID : SD10.4175

Amount Incurred This Period

0.00

Payment This Period

4900.15

Outstanding Balance at Close of This Period

5612.13

1) **SUBTOTALS** This Period This Page (optional)..... ►

170182.70

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 333 OF 369

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

LEGACY LIST MANAGEMENT INCNature of Debt (Purpose):
LIST RENTALSMailing Address 1155 - 15TH STREET NW
SUITE 410City State Zip Code
WASHINGTON DC 20005

Outstanding Balance Beginning This Period

12637.65

Transaction ID : SD10.4169

Amount Incurred This Period

6316.13

Payment This Period

11149.78

Outstanding Balance at Close of This Period

7804.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MACKENZIE & COMPANYNature of Debt (Purpose):
CONSULTING - COMPLIANCEMailing Address 2776 S ARLINGTON MILL DR
NUM 806City State Zip Code
ARLINGTON VA 22206

Outstanding Balance Beginning This Period

6087.60

Transaction ID : SD10.4172

Amount Incurred This Period

8580.60

Payment This Period

7433.00

Outstanding Balance at Close of This Period

7235.20

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

MDI IMAGING & MAILNature of Debt (Purpose):
DIRECT MAIL - PRINTING & MAILSHOP

Mailing Address 21721-A FILIGREE CT

City State Zip Code
ASHBURN VA 20147

Outstanding Balance Beginning This Period

9120.49

Transaction ID : SD10.45859

Amount Incurred This Period

0.00

Payment This Period

9120.49

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

15039.20

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 334 OF 369

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

PROLIST DIRECT MARKETING SERVICESNature of Debt (Purpose):
DATA PROCESSINGMailing Address 4510 BUCKEYSTOWN PIKE
SUITE MCity State Zip Code
FREDERICK MD 21704

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.56712

Amount Incurred This Period

8895.30

Payment This Period

0.00

Outstanding Balance at Close of This Period

8895.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SIMPKINS ESCROW LLCNature of Debt (Purpose):
ESCROW SERVICES

Mailing Address ST JUST RD

City State Zip Code
UNIONVILLE VA 22567

Outstanding Balance Beginning This Period

1859.07

Transaction ID : SD10.4173

Amount Incurred This Period

2138.82

Payment This Period

2099.11

Outstanding Balance at Close of This Period

1898.78

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

10794.08

2) **TOTALS** This Period (last page this line number only)..... ►

344847.75

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

344847.75

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 335 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y		

Full Name of Payee CONSOLIDATED MAILING SERVICES		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 504 SHAW RD SUITE 206			Amount 24750.57	
City STERLING	State VA	Zip Code 20166	Transaction ID : SE.56714	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y 08 / 31 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		196804.33	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee CONSOLIDATED MAILING SERVICES		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 08 / 31 / 2016	
Mailing Address 504 SHAW RD SUITE 206			Amount 3535.80	
City STERLING	State VA	Zip Code 20166	Transaction ID : SE.56722	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004	Date of Disbursement or Obligation M M / D D / Y Y Y Y 08 / 31 / 2016	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		44676.23	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	28286.37
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y
 09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 336 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00553560 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee <input type="checkbox"/> Memo Item CONSOLIDATED MAILING SERVICES			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 504 SHAW RD SUITE 206			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3535.80 </div>	
City State Zip Code STERLING VA 20166		Transaction ID : SE.56730 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>		
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose WILLIAM HURD			Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 43463.47			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input type="checkbox"/> Memo Item CONSOLIDATED MAILING SERVICES			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 504 SHAW RD SUITE 206			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3535.80 </div>	
City State Zip Code STERLING VA 20166		Transaction ID : SE.56738 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>		
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>
Name of Federal Candidate <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose MIA LOVE			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought 3535.80			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 7071.60 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>SCOTT B MACKENZIE</u>			Date M M / D D / Y Y Y Y Y Y	
[Electronically Filed]			Date 09 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 337 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y		

Full Name of Payee DIRECT SUPPORT SERVICES INC		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 21054.62	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56715	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004	Date of Disbursement or Obligation 08 / 31 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 217858.95		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee DIRECT SUPPORT SERVICES INC		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 3007.80	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56723	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004	Date of Disbursement or Obligation 08 / 31 / 2016	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought 47684.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	24062.42
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 338 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ C C00553560		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY					
Full Name of Payee DIRECT SUPPORT SERVICES INC			Date of Public Distribution/Dissemination MM / DD / YYYYYY 08 / 31 / 2016		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 3007.80		
City WASHINGTON		State DC	Zip Code 20005		Transaction ID : SE.56731
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYYYY 08 / 31 / 2016	
Name of Federal Candidate WILLIAM HURD			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 46471.27			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee DIRECT SUPPORT SERVICES INC			Date of Public Distribution/Dissemination MM / DD / YYYYYY 08 / 31 / 2016		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 3007.80		
City WASHINGTON		State DC	Zip Code 20005		Transaction ID : SE.56739
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYYYY 08 / 31 / 2016	
Name of Federal Candidate MIA LOVE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>		
Calendar Year-To-Date Per Election for Office Sought 6543.60			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			6015.60		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>SCOTT B MACKENZIE</u>			Date MM / DD / YYYYYY 09 / 20 / 2016		

[Electronically Filed]

Full Name of Payee DONOR BUREAU		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1900 N CULPEPPER ST				Amount 92.51	
City ARLINGTON	State VA	Zip Code 22207		Transaction ID : SE.56725	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC		
Calendar Year-To-Date Per Election for Office Sought		48653.59		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures.....	740.06
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Signature

Full Name of Payee DONOR BUREAU		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1900 N CULPEPPER ST				Amount 92.51	
City ARLINGTON	State VA	Zip Code 22207	Transaction ID : SE.56741		
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/ Type	004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought		7513.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	185.02
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date _____

Signature

Full Name of Payee DSSI		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 877.05	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56724 Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/ Type 004		
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought 48561.08		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....	7016.42
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 342 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee DSSI		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 877.05	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56732	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought		47348.32	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee DSSI		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 877.05	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56740	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought		7420.65	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1754.10
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 343 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / MM / YYYY			
Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Date of Public Distribution/Dissemination 08 / 03 / 2016	
City State Zip Code WASHINGTON DC 20005		Amount 8792.75	
Purpose of Expenditure VOTER CONTACT MAIL		Transaction ID : SE.38168 Date of Disbursement or Obligation 08 / 03 / 2016	
Category/Type 004			
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>04</u> State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought 38182.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Date of Public Distribution/Dissemination 08 / 03 / 2016	
City State Zip Code WASHINGTON DC 20005		Amount 8792.75	
Purpose of Expenditure VOTER CONTACT MAIL		Transaction ID : SE.38169 Date of Disbursement or Obligation 08 / 03 / 2016	
Category/Type 004			
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>23</u> State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 39927.67		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature SCOTT B MACKENZIE		Date 09 / 20 / 2016 <i>[Electronically Filed]</i>	

C C00553560

0.00

(c) **TOTAL** Independent Expenditures.....

MM / DD / YYYY

FEC Schedule E (Form 3X) Rev. 12/2015

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 345 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00553560 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 08 / 06 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">14668.36</div>	
City WASHINGTON State DC Zip Code 20005		Transaction ID : SE.38182 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 08 / 06 / 2016 </div>		
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <input type="checkbox"/> Support HILLARY RODHAM CLINTON <input checked="" type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">172053.76</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 08 / 10 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1147.22</div>	
City WASHINGTON State DC Zip Code 20005		Transaction ID : SE.38187 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 08 / 10 / 2016 </div>		
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate <input checked="" type="checkbox"/> Support TIMOTHY E SCOTT <input type="checkbox"/> Oppose			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">41140.43</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>SCOTT B MACKENZIE</u>			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 09 / 20 / 2016 </div>	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 346 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00553560</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">Y Y Y Y Y Y Y Y</div>				
Full Name of Payee FORTH RIGHT STRATEGY INC			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">08</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1147.22</div>	
City WASHINGTON		State DC	Zip Code 20005	
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">004</div>		Transaction ID : SE.38188 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">08</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>
Name of Federal Candidate BENJAMIN E SASSE			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NE</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">2133.48</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee FORTH RIGHT STRATEGY INC			<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">08</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">1147.22</div>	
City WASHINGTON		State DC	Zip Code 20005	
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 40px; text-align: center;">004</div>		Transaction ID : SE.38189 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">08</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>
Name of Federal Candidate PATRICK JOSEPH TOOMEY			<input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">2650.95</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">0.00</div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <div style="border-top: 1px solid black; width: 100%;"></div>			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">20</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px; text-align: center;">2016</div>	

SCOTT B MACKENZIE

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 347 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00553560 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2016 </div>
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1147.22</div>
City WASHINGTON	State DC	
Zip Code 20005	Transaction ID : SE.38190 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2016 </div>	
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type 004	
Name of Federal Candidate KELLY A AYOTTE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2187.68</div>		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2016 </div>
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1147.22</div>
City WASHINGTON	State DC	
Zip Code 20005	Transaction ID : SE.38191 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y 08 / 10 / 2016 </div>	
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type 004	
Name of Federal Candidate ROB PORTMAN		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2591.78</div>		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: OH Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

M M M / D D D / Y Y Y Y Y Y
 09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 348 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410		City WASHINGTON		State DC	
Zip Code 20005					
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004		Amount 1147.22	
Name of Federal Candidate RONALD HAROLD JOHNSON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WI	
Calendar Year-To-Date Per Election for Office Sought		2360.14		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 10 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410		City WASHINGTON		State DC	
Zip Code 20005					
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004		Amount 1147.22	
Name of Federal Candidate MARCO RUBIO		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

 MM / DD / YYYY
 09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 349 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 08 / 10 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1147.22	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.38194	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 08 / 10 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought 38182.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 08 / 10 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1147.22	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.38195	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 08 / 10 / 2016	
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 39927.67		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 350 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00553560 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y				
Full Name of Payee <input checked="" type="checkbox"/> Memo Item FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 10 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1147.22 </div>	
City WASHINGTON State DC Zip Code 20005		Transaction ID : SE.38196 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 10 / 2016 </div>		
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004		
Name of Federal Candidate <input checked="" type="checkbox"/> Support ALEXANDER XAVIER MOONEY <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought 3092.84 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee <input checked="" type="checkbox"/> Memo Item FORTH RIGHT STRATEGY INC			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 10 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1147.22 </div>	
City WASHINGTON State DC Zip Code 20005		Transaction ID : SE.38199 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 10 / 2016 </div>		
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004		
Name of Federal Candidate <input checked="" type="checkbox"/> Support RYAN K ZINKE <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MT</u>	
Calendar Year-To-Date Per Election for Office Sought 3015.68 			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature <u>SCOTT B MACKENZIE</u>			Date M M / D D / Y Y Y Y Y Y 09 / 20 / 2016	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 351 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00553560 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2016</div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1147.22</div>		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.38200	
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2016</div>	
Name of Federal Candidate THOMAS EARL JR. EMMER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">3229.75</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2016</div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">13766.79</div>		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.38202	
Purpose of Expenditure VOTER CONTACT MAIL	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		Date of Disbursement or Obligation MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2016</div>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">172053.76</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

 MM / DD / YYYY

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 352 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> M M M / D D D / Y Y Y Y Y Y . . . / . . . / </div>	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 12 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount <div style="border: 1px solid black; padding: 2px;"> 27072.43 </div>		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.38217	
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 12 / 2016 </div>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> 172053.76 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 19 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount <div style="border: 1px solid black; padding: 2px;"> 21531.58 </div>		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45703	
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 08 / 19 / 2016 </div>	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;"> 172053.76 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

M M / D D / Y Y Y Y Y Y
 09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 353 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount 21186.30		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45861	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		172053.76	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410		Amount 169.01		
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45862	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought		41140.43	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 354 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560																								
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td colspan="3"></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td colspan="3"></td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td colspan="6"></td></tr> </table>			M	M					D	D					Y	Y	Y	Y	Y	Y						
M	M																									
D	D																									
Y	Y	Y	Y	Y	Y																					

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 878.99	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45863	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought		39927.67	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 90.98	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45864	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought		38182.31	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

 MM / DD / YYYY
09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 355 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)				FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00553560 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee <input type="checkbox"/> Memo Item FORTH RIGHT STRATEGY INC				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 23986.38 </div>	
City WASHINGTON State DC Zip Code 20005		Transaction ID : SE.56718 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>			
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004		Name of Federal Candidate <input type="checkbox"/> Support HILLARY RODHAM CLINTON <input checked="" type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State:		Calendar Year-To-Date Per Election for Office Sought 248632.25			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
Full Name of Payee <input type="checkbox"/> Memo Item FORTH RIGHT STRATEGY INC				Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>	
Mailing Address 1155 - 15TH STREET NW SUITE 410				Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3426.63 </div>	
City WASHINGTON State DC Zip Code 20005		Transaction ID : SE.56726 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>			
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type 004		Name of Federal Candidate <input checked="" type="checkbox"/> Support TIMOTHY E SCOTT <input type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC		Calendar Year-To-Date Per Election for Office Sought 52080.22			
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶					
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 27413.01 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
(c) TOTAL Independent Expenditures..... ▶				<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <u>SCOTT B MACKENZIE</u>				Date 09 / 20 / 2016	
[Electronically Filed]					

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 356 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ C C00553560		
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>					
Full Name of Payee FORTH RIGHT STRATEGY INC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">08 / 31 / 2016</div>		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">3426.63</div>		
City WASHINGTON		State DC	Zip Code 20005		Transaction ID : SE.56734 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">08 / 31 / 2016</div>
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">004</div>			
Name of Federal Candidate WILLIAM HURD			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">50867.46</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee FORTH RIGHT STRATEGY INC <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">08 / 31 / 2016</div>		
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">3426.63</div>		
City WASHINGTON		State DC	Zip Code 20005		Transaction ID : SE.56742 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">08 / 31 / 2016</div>
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">004</div>			
Name of Federal Candidate MIA LOVE			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>		
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10939.79</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">6853.26</div>		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature SCOTT B MACKENZIE			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">09 / 20 / 2016</div>		

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 357 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 07 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 13520.41	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45871	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 07 / 2016	
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		263608.65	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 07 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1138.10	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45874	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 07 / 2016	
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought		54219.70	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 358 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1138.10	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45875	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2016	
Name of Federal Candidate BENJAMIN E SASSE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NE	
Calendar Year-To-Date Per Election for Office Sought		2133.48	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 07 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1138.10	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45876	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 07 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought		38182.31	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 359 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 07 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1138.09	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45877	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 07 / 2016	
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought		53006.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 07 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 1138.09	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45878	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 07 / 2016	
Name of Federal Candidate RYAN K ZINKE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MT</u>	
Calendar Year-To-Date Per Election for Office Sought		3015.68	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 360 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560																								
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>M</td><td>M</td><td></td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>D</td><td>D</td><td></td></tr> <tr><td> </td><td> </td><td> </td></tr> </table> / <table border="1" style="display:inline-table; margin-left:10px"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>			M	M					D	D					Y	Y	Y	Y	Y	Y						
M	M																									
D	D																									
Y	Y	Y	Y	Y	Y																					

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>09</td><td>07</td><td>2016</td></tr> </table>		09	07	2016
09	07	2016					
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <table border="1" style="display:inline-table"> <tr><td>1138.09</td></tr> </table>		1138.09		
1138.09							
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45879				
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table"> <tr><td>09</td><td>07</td><td>2016</td></tr> </table>		09	07	2016
09	07	2016					
Name of Federal Candidate THOMAS EARL JR. EMMER		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN				
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table"> <tr><td>3229.75</td></tr> </table>	3229.75	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
3229.75							

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <table border="1" style="display:inline-table"> <tr><td>09</td><td>07</td><td>2016</td></tr> </table>		09	07	2016
09	07	2016					
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount <table border="1" style="display:inline-table"> <tr><td>1138.09</td></tr> </table>		1138.09		
1138.09							
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45880				
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation <table border="1" style="display:inline-table"> <tr><td>09</td><td>07</td><td>2016</td></tr> </table>		09	07	2016
09	07	2016					
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV				
Calendar Year-To-Date Per Election for Office Sought		<table border="1" style="display:inline-table"> <tr><td>3092.84</td></tr> </table>	3092.84	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			
3092.84							

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<table border="1" style="display:inline-table"> <tr><td>0.00</td></tr> </table>	0.00
0.00		
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<table border="1" style="display:inline-table"> <tr><td> </td></tr> </table>	
(c) TOTAL Independent Expenditures.....▶	<table border="1" style="display:inline-table"> <tr><td> </td></tr> </table>	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09	20	2016
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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 361 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 11853.98	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45889	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 09 / 2016	
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought		53006.94	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 11853.98	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45890	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 09 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought		38182.31	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 362 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 09 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 11853.98
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45891
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation 09 / 09 / 2016
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought 54219.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 09 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 4292.13
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45896
Purpose of Expenditure VOTER CONTACT MAIL		Category/ Type 004	Date of Disbursement or Obligation 09 / 09 / 2016
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>
Calendar Year-To-Date Per Election for Office Sought 54219.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 363 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 4292.13	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45897	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 09 / 2016	
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>04</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>	
Calendar Year-To-Date Per Election for Office Sought 38182.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee FORTH RIGHT STRATEGY INC		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 09 / 09 / 2016	
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 4292.13	
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.45898	
Purpose of Expenditure VOTER CONTACT MAIL		Category/Type 004	Date of Disbursement or Obligation 09 / 09 / 2016	
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought 53006.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 364 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00553560 </div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY				
Full Name of Payee INTEGRAM <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYYYY </div>	
Mailing Address 8421 HILLTOP RD			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>	
City FAIRFAX		State VA	Zip Code 22031	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS			Transaction ID : SE.56719 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYYYY </div>	
Name of Federal Candidate HILLARY RODHAM CLINTON			Category/Type 004	
Name of Federal Candidate HILLARY RODHAM CLINTON			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee INTEGRAM <input type="checkbox"/> Memo Item			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYYYY </div>	
Mailing Address 8421 HILLTOP RD			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>	
City FAIRFAX		State VA	Zip Code 22031	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS			Transaction ID : SE.56727 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYYYY </div>	
Name of Federal Candidate TIMOTHY E SCOTT			Category/Type 004	
Name of Federal Candidate TIMOTHY E SCOTT			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought			Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>SC</u>	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 08 / 31 / 2016 </div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature SCOTT B MACKENZIE			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYYYY </div>	
Signature			Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 09 / 20 / 2016 </div>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 365 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00553560</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>				
Full Name of Payee INTEGRAM			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 8421 HILLTOP RD			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
City FAIRFAX		State VA	Zip Code 22031	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate WILLIAM HURD			Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee INTEGRAM			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 8421 HILLTOP RD			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
City FAIRFAX		State VA	Zip Code 22031	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate MIA LOVE			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 833.02	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature SCOTT B MACKENZIE			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> [Electronically Filed] 09 / 20 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 366 OF 369
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee LEGACY LIST MANAGEMENT INC		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 6634.12
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56721
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016
Name of Federal Candidate HILLARY RODHAM CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 263608.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee LEGACY LIST MANAGEMENT INC		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 08 / 31 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 947.73
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56729
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS	Category/Type 004		Date of Disbursement or Obligation MM / DD / YYYY 08 / 31 / 2016
Name of Federal Candidate TIMOTHY E SCOTT		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC
Calendar Year-To-Date Per Election for Office Sought 54219.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7581.85
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Signature

Date

MM / DD / YYYY
09 / 20 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 367 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)		FEC IDENTIFICATION NUMBER ▼ C C00553560
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee LEGACY LIST MANAGEMENT INC		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 08 / 31 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 947.73
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56737
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS	Category/Type 004		Date of Disbursement or Obligation 08 / 31 / 2016
Name of Federal Candidate WILLIAM HURD		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>
Calendar Year-To-Date Per Election for Office Sought 53006.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee LEGACY LIST MANAGEMENT INC		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 08 / 31 / 2016
Mailing Address 1155 - 15TH STREET NW SUITE 410			Amount 947.73
City WASHINGTON	State DC	Zip Code 20005	Transaction ID : SE.56745
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS	Category/Type 004		Date of Disbursement or Obligation 08 / 31 / 2016
Name of Federal Candidate MIA LOVE		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>UT</u>
Calendar Year-To-Date Per Election for Office Sought 13079.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1895.46
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

SCOTT B MACKENZIE

[Electronically Filed]

Date

09 / 20 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 368 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00553560</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>				
Full Name of Payee MDI IMAGING & MAIL			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Mailing Address 21721-A FILIGREE CT			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 5426.69	
City ASHBURN		State VA	Zip Code 20147	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate HILLARY RODHAM CLINTON			Office Sought: <input type="checkbox"/> House District: 00 <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 256974.53			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee MDI IMAGING & MAIL			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Mailing Address 21721-A FILIGREE CT			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 775.24	
City ASHBURN		State VA	Zip Code 20147	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate TIMOTHY E SCOTT			Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: SC	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 53271.97			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 6201.93	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
(c) TOTAL Independent Expenditures..... ▶			<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature SCOTT B MACKENZIE			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 09 / 20 / 2016	

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 369 OF 369
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) VIGOP (VIRGIN ISLANDS REPUBLICAN PARTY)			FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00553560</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>				
Full Name of Payee MDI IMAGING & MAIL			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 21721-A FILIGREE CT			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 775.24	
City ASHBURN		State VA	Zip Code 20147	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate WILLIAM HURD			Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee MDI IMAGING & MAIL			Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div>	
Mailing Address 21721-A FILIGREE CT			Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 775.24	
City ASHBURN		State VA	Zip Code 20147	
Purpose of Expenditure ALLOCATED VOTER CONTACT MAILINGS		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>		
Name of Federal Candidate MIA LOVE			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT	
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 1550.48				
(b) SUBTOTAL of Unitemized Independent Expenditures ▶ <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>				
(c) TOTAL Independent Expenditures..... ▶ <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 130792.70				
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Signature SCOTT B MACKENZIE			Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 80px;"></div> 09 / 20 / 2016	

[Electronically Filed]